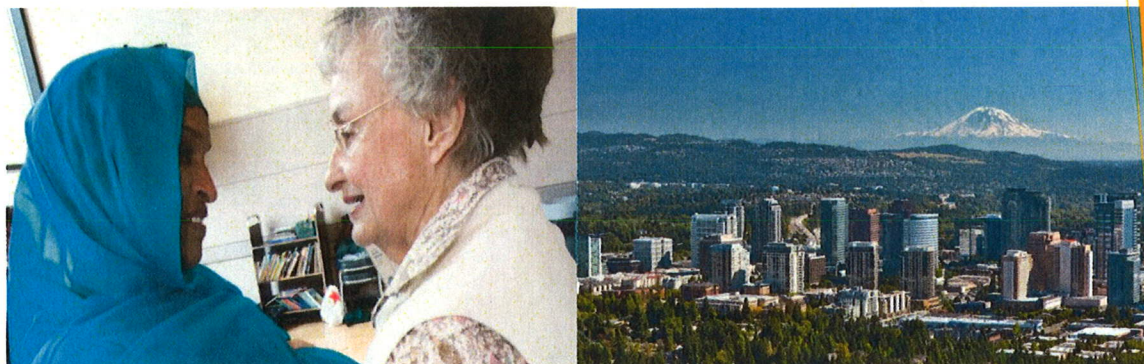




*Bellevue Diversity
Initiative*

The Diversity Advantage

Putting the positive power of diversity to work in our community



Bellevue welcomes the world.

Our diversity is our strength.

Bellevue City Council Vision Statement, 2014



Recommendations

Adopted December 8, 2014

Cultural Competence in City Government

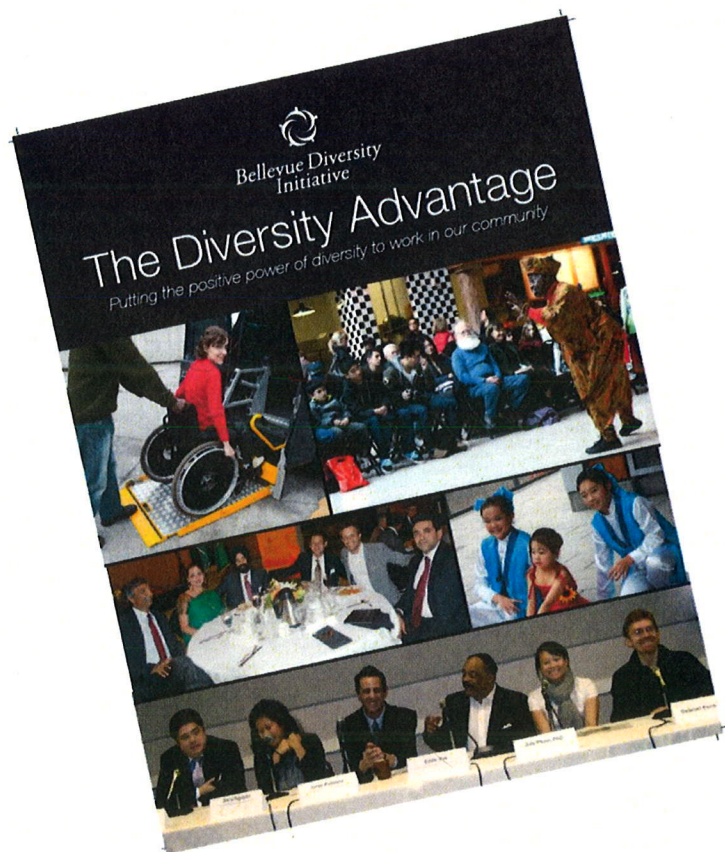
1. Obtain endorsement and direction from the City Council and Leadership Team to include cultural competence as a **core competency** of the organization in policy and practice.
2. Hire a Cultural Competence and Equity professional to integrate cultural competence and equity as elements in City policy development, programming, service delivery and program evaluation.
 - a. **Regularly review and evaluate** City-wide cultural competence efforts in the following categories: organizational values, policies, staffing, resources, service delivery and public outreach.
 - b. Establish a **knowledge base** of best practices and available resources for cultural competence and equity within the City.
3. Establish **performance measures** to track progress at meeting goals and actions of the Initiative.
4. Provide systematic and regular cultural competence **training for all City staff** over a five-year period.
5. Provide cultural competence **training for City volunteers and community leaders**, including those serving on City boards, commissions and advisory committees.
6. Add cultural competence as an **evaluative criterion** in the City's budget process.
7. Strengthen and **advance recruitment efforts** of diverse City staff to better reflect city demographics.
8. Dovetail the City's existing **accessibility and compliance programs** (ADA, Section 504, Title VI) with the Diversity Initiative to achieve similar goals of increased performance and outcomes across all City services.
9. **Establish City-wide standards** for translation of written material, interpretation services at meetings, and for physical access to meetings and programs.
10. Conduct a comprehensive review of public information tools, protocols and resources to identify strategies and **methods for more effective communication** with diverse populations.
11. **Explore and identify** additional Mini-City Hall locations to improve local accessibility to City services.
12. **Dedicate resources** for City departments to innovate and adapt to provide culturally competent services and improve public outreach and civic engagement.

Cultural Competence in the Community

1. Invest in **more public gathering spaces, or Third Places**, throughout Bellevue for people to connect, celebrate and interact.
2. Support and produce special events, art exhibits and performances, educational materials, festivals and public information that **increase opportunities for cultural interaction and education**.
3. Convene a community advisory group to explore a charter to establish a **"Bellevue Diversity Institute"**. This experiential learning center would serve as a citywide cultural center and would be a resource for businesses, schools and other community groups and organizations. Its mission would be to educate, celebrate, challenge and inspire Bellevue to be a welcoming and inclusive community that embraces diversity.
4. Improve **outreach** and engagement to build relationships with isolated communities and establish trust and affinity.
5. Develop a **Cultural Liaison Program**, where representatives of culture groups work as liaisons between their group and the City, or other community institutions.
6. Continue to produce and distribute **demographic information** and analysis to residents, businesses, nonprofits and public and private educational institutions to elevate understanding of Bellevue's ever-evolving diversity.
7. Produce **welcome packets** for new residents with language translations available, promoting community organizations, City services and local businesses.
8. **Increase public awareness** through branding work that incorporates key messaging about Bellevue as a welcoming community with a world-wide view, and acceptance of diversity as a positive aspect of living and working in Bellevue.
9. Collect regular **community feedback** and utilize volunteers to help assess City services from a diversity perspective. Track **performance measures** on cultural competence exhibited within the community.
10. **Coordinate** with local community groups and organizations dedicated to issues of diversity and culture.

Human Services

1. Support the establishment of a **year-round homeless shelter** on the Eastside.
2. **Translate** city materials on human service resources and referral programs available in Bellevue into the most commonly spoken languages.
3. Assist non-profit human service agencies in providing **culturally competent care** and support to Bellevue residents of all ages, abilities and ethnic backgrounds.
4. Engage the Eastside Human Services Forum in **regional discussions** of diversity in human services.
5. Promote bicultural and bi-lingual programs that **help individuals access public and nonprofit human services systems**, such as the Cultural Navigator Program.
6. Support human service organizations in providing cultural competence **training** for their staff.
7. **Recruit diverse community volunteers** to support programs and services that meet human service needs in Bellevue.



Public Safety

1. Continue **recruitment efforts** designed to diversify public safety staff to better reflect city demographics.
2. Provide ongoing cultural competence **training** to all public safety staff.
3. Improve access to public health and safety information through **partnerships with ethnic media**.
4. **Address under-reporting of crime** by promoting the City of Bellevue as a safe place for residents to report instances of civil rights violation, housing and other forms of discrimination.
5. Periodically **convene focus groups** of people of various ages, abilities and race and ethnic backgrounds to ask and learn about appropriate public safety service delivery methods.
6. Support public safety programs that **outreach to vulnerable people groups**, including the elderly, disabled and isolated communities.

Education

1. Collaborate with the Bellevue School District, Bellevue College and other community organizations to **establish a common language** and definitions around cultural competence and social equity.
2. Encourage and support **community conversations** on the issues of disability, economic class, gender, sexual orientation race and ethnicity.
3. Support local schools and colleges in providing comprehensive services and support to diverse student populations to **erase achievement gaps** where they exist.
4. **Strengthen Wrap-Around Services** for targeted schools within the Bellevue School District to build up community efforts to address achievement gaps.
5. Work with Bellevue School District, Eastside Pathways and other education programs to share information and identify strategies to **improve teacher/family communications**.
6. Work with community partners to provide **leadership training and mentoring** opportunities for our youth.
7. With community partners, develop a long-term marketing **education and branding strategy** to focus positive attention on diversity and diverse groups.

Economic Development

1. Provide opportunities for current and future Bellevue residents and workers by implementing regulatory and incentive tools to increase the supply of **affordable housing**.
2. Improve regional efforts to support **entrepreneur and small business creation**, including training, loan assistance, mentoring opportunities, gathering spaces and networking.
3. Embed cultural competence within City **organizational policy** such as the Comprehensive Plan and Economic Development Strategy.
4. Promote and support programs that offer community-based **employment opportunities** for individuals with barriers to employment, such as ability, age and language.
5. Convene **periodic gatherings** of Bellevue's public and private institutions and business leaders in efforts to collectively apply corporate citizenship resources to local diversity initiatives.
6. **Identify gaps** in goods and services provided on the Eastside for specialized markets.
7. Work with the Bellevue Chamber of Commerce to reinvigorate the **Bellevue Entrepreneur Center**.
8. Protect and **improve transit** services.



Civic Engagement

1. **Emphasize outreach** to establish trust within the social networks of our diverse communities as the first step in broadening their participation.
2. Develop and implement a strategy to **increase diverse representation** on City boards, commissions, advisory committees and task forces. This should include efforts to identify, recruit and train emerging leaders to be considered for these appointed positions.
3. **Interpretation, translation and accommodation services** at public meetings should be consistent and reliable over time to shape community expectations.
4. **Encourage faith community** leadership to become more civically engaged.
5. Increase **support for artists** (e.g. funding, exhibition/performance opportunities, etc.) whose work addresses intercultural themes.
6. Partner with the Eastside Heritage Center to **interpret the history of diversity** in the Bellevue community.
7. Collaborate with local partner organizations to develop community **leadership training and mentoring** programs benefiting under-represented population groups.
8. Develop and implement a **civic engagement strategy** to increase general participation in local government among diverse populations.
9. Ensure that civic engagement events include **follow up** efforts to inform participants of how their input has influenced decision making.
10. **Provide funding** and partnerships to community groups or initiatives that meet City of Bellevue diversity goals.

Administrative Order No. 15-01


Approval- City Manager

July 17, 2015
Effective Date

Title: ADA Coordinator Designation

Date Issued: July 17, 2015

Sponsors: Kerry Sievers, HR Director
Patrick Foran, Parks Director

Sponsoring Departments: Human Resources and Parks and Community
Services Department

Purpose/Short Description:

28 C.F.R. pt. 35, § 35.107(a) (2005) states in pertinent part:

§ 35.107(a) Designation of responsible employee and adoption of grievance procedures.

(a) Designation of responsible employee. A public entity that employs 50 or more persons shall designate at least one employee to coordinate its efforts to comply with and carry out its responsibilities under this part, including any investigation of any complaint communicated to it alleging its noncompliance with this part or alleging any actions that would be prohibited by this part. The public entity shall make available to all interested individuals the name, office address, and telephone number of the employee or employees designated pursuant to this paragraph.

(b) Complaint procedure. A public entity that employs 50 or more persons shall adopt and publish grievance procedures providing for prompt and equitable resolution of complaints alleging any action that would be prohibited by this part.

Because the City is a public entity with 50 or more employees, the City Manager's Office designated the HR Director as the responsible employee to coordinate ADA compliance. Since the time of that designation, the City embarked upon the Diversity Initiative hiring personnel specifically for the purpose of addressing ADA compliance. The purpose of this order is to change the designee for ADA compliance from the HR Director to the ADA/Title VI Civil Rights Program Administrator who is currently assigned to the Parks and

Community Services Department. This order is made pursuant to the requirements of 28 C.F.R. pt. 35, § 35.107(a) (2005).

Text of Order:

In compliance with **28 C.F.R. pt. 35, § 35.107(a) (2005) Designation of responsible employee and adoption of grievance procedures**, the City Manager hereby designates the ADA/Title VI Civil Rights Program Administrator, as the official employee responsible for coordinating the City's efforts to comply with and carry out, its responsibilities under the law with respect to ADA, including any investigation of a complaint communicated to the City alleging the City's noncompliance with ADA or alleging any actions that would be prohibited by the ADA. The City's current ADA/Title VI Civil Rights Program Administrator name, title, office address, and telephone number are as follows:

Jennifer Mechem

ADA/Title VI Civil Rights Program Administrator
City of Bellevue
450 110th Ave NE
Bellevue, WA 98004
(425) 452-4471 voice
TTY users: dial 711 for relay

The designation of the ADA/Title VI Civil Rights Program Administrator as the official employee responsible for ADA coordination on behalf of the City shall not change except by Administrative Order. However, the actual individual and phone number may be changed by the Director of Parks and Community Services, on an as needed basis, without an Administrative Order. Notice of any such change will be disseminated to all departments and contained on the City's website.

Accessibility Request

This form allows residents and businesses to submit accessibility requests related to a wide variety of issues, including curb ramps, sidewalk obstructions and access to buildings, facilities and programs. The form will be reviewed by the ADA/Title VI program administrator and a response will be provided via email. (*To report a situation that may endanger pedestrians or bicyclists, please call the Transportation Department's maintenance hotline at 425-452-7840.*)

Please provide as much information about your accessibility request in the form as possible. The more complete the information, the better we can serve you.

* Required Field

Type of accessibility or accommodation request: *

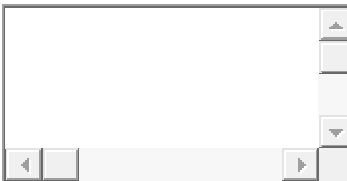
Choose primary issue from the list below. Describe additional issues at this location using the "Describe Problem" box.

- ☐ Curb ramp
- ☐ Sidewalk
- ☐ Facility
- ☐ Obstruction
- ☐ Trip Hazard
- ☐ Signage
- ☐ Signal
- ☐ Park Facilities
- ☐ Park Programs
- ☐ Fire Facilities
- ☐ Utilities
- ☐ Other

Problem Address

Street Address: * (enter none if unknown or not applicable)

Cross Street:

Describe Problem: * 

Requestor Information:

Please note that any requests and/or information regarding the requesting party are kept confidential.

First Name:

Last Name:

Company name: (if applicable)

Address:

Suite/Apartment/Unit:

City:

State:

Zip:

Phone: (standard format: XXX-XXX-XXXX)

E-mail:

Please print a copy of this page before sending if you want to retain a copy of your E-Services transaction. To print the page, use the "File" menu and choose "Print."

Bottom of Form



CITIZEN WHEELCHAIR RAMP REQUEST



City of
Bellevue

Transportation Department



Please provide a written description or a sketch of the location(s)
where wheelchair ramps are missing or are deficient.

LOCATION: NE NW SE SW ALL corner(s) of the
(please circle appropriate locations)
intersection between _____
(please list intersecting streets above)

Please mark intersection
corners where wheelchair
ramps are missing or are
deficient with an 'X'.



Street Name

Street Name

PLEASE PROVIDE BELOW

Comments, suggestions or other
information that may assist us in
providing better service to you.

REPORTED BY: Name _____ Day Phone _____
Address _____ Zip _____ Date _____

Please return to: City of Bellevue, Transportation Department
450 - 110th Ave. NE
P.O. Box 90012
Bellevue, WA 98009-9012

For more information,
Contact Mike Rodni at
425-452-4586

City of Bellevue
Americans with Disabilities Act (ADA)
Complaint Procedures

A. Overview

These procedures cover all complaints filed under the Americans with Disabilities Act of 1990, relating to any program, facility or activity managed by the City of Bellevue. The procedures do not deny the right of the complainant to file formal complaints with other state or federal agencies or to seek private counsel for complaints alleging discrimination or unaccommodated barriers to access. Every effort will be made to resolve complaints informally at the city level. The option of informal mediation meeting(s) between the affected parties and a designated mediator may be utilized for resolution. Intimidation or retaliation of any kind is prohibited by law.

B. Procedures

1. Any individual, group of individuals or entity that believes they have been subjected to discrimination or faced unaccommodated barriers to access as defined by the ADA may file a written complaint with Yvonne Tate, Human Resources Director and Citywide ADA Coordinator. A formal complaint must be filed within 180 calendar days of the alleged occurrence. The city will not officially act or respond to complaints made verbally.
2. Upon receiving the written complaint, the Citywide ADA Coordinator, in consultation with other city offices, will determine its jurisdiction, acceptability, need for additional information and the investigative merit of the complaint.
3. If the complaint is against the City of Bellevue, the city may request that an external entity conduct the investigation. If the complaint is against a sub-recipient, consultant or contractor, under contract with the city, the appropriate department and/or division shall be notified of the complaint within 15 calendar days, and the city will determine whether it will investigate the complaint or request that a third party conduct the investigation.
4. Once the city decides its course of action, the complainant and the respondent will be notified in writing of such determination within five (5) calendar days. The complaint will be logged into the records of the ADA Coordinator.
5. In cases where the City of Bellevue assumes investigation of the complaint, the city will provide the respondent with the opportunity to respond to the allegations in writing. The respondent will have ten (10) calendar days upon receipt to furnish the city with his/her response to the allegations.
6. Within 60 days of receipt of the complaint, the ADA Coordinator or third-party investigator will prepare a written investigative report for the appropriate department director and the City Manager. The report shall include a narrative description of the incident, identification of persons interviewed, findings and recommendations for disposition.
7. The recommendation shall be reviewed by the City Attorney's office, which may discuss the report and recommendations with the ADA Coordinator and other appropriate departmental staff. The report will be modified as needed and finalized for its release to the parties.

8. Once the investigative report becomes final, briefings will be scheduled with each party within 15 days. Both the complainant and the respondent shall receive a copy of the report during the briefings and will be notified of their respective appeal rights.

9. If the complainant or respondent is not satisfied with the results of the investigation of the alleged discriminatory practice(s) he or she shall be advised of their rights to appeal the decision to the U.S. Department of Justice. The complainant has 180 calendar days after the appropriate agency's final resolution to appeal to USDOJ. Unless new facts not previously considered come to light, reconsideration of the final determination by the investigating agency will not be available.

11. The ADA Coordinator will maintain an annual log of complaints, which will contain the following information for each complaint filed:

- The name and address of the person filing the complaint
- The date of the complaint
- The basis of the complaint
- The disposition of the complaint
- The status of the complaint

ORIGINAL

WP0064C-RES
11/16/92

CITY OF BELLEVUE, WASHINGTON

RESOLUTION NO. 5586

A RESOLUTION adopting a City policy of compliance with the Americans With Disabilities Act and establishing a program to promote full participation for all people who use City services and programs.

WHEREAS, the City Council of the City of Bellevue is committed to encouraging full participation in programs and services for all individuals, including those with physical, sensory and mental disabilities; and

WHEREAS, the City Council of the City of Bellevue desires to contribute to the social good by making government services and decision making processes accessible to all persons; and

WHEREAS, the City Council of the City of Bellevue desires to comply with the requirements of the Americans With Disabilities Act and evaluate issues of accessibility in all facilities, programs and services; now, therefore

THE CITY COUNCIL OF THE CITY OF BELLEVUE, WASHINGTON, DOES RESOLVE AS FOLLOWS:

Section 1. Policy of Nondiscrimination. The following shall be the policy of nondiscrimination for the City of Bellevue:

The City Council believes that, so far as is reasonably possible, all persons should be provided with access to City facilities, services and programs. The City Council, therefore, endorses the purpose and goal of the Americans With Disabilities Act and directs the City Manager to adopt a program which will provide full participation to all individuals by reasonably accommodating persons with physical, mental, or sensory disabilities, to the extent required by the Americans With Disabilities Act.

Section 2. Compliance Program. The City Manager is directed to prepare, administer and maintain a program of nondiscrimination, consistent with the requirements of the Americans With Disabilities Act, which will enable the City to systematically evaluate accessibility of services to those persons who are reasonably qualified to partake of those services. Consistent with State and Federal law, the program will address the following areas:

Employment

The City will evaluate all employment practices and policies for accessibility. Policies and practices will assess an

ORIGINAL

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11/16/92

individual's abilities to perform the essential functions of any job which is desired or held by that person. When employment of a disabled individual is not possible because of a barrier which exists, the City will investigate reasonable accommodations to remove that barrier, to the extent required by the Americans With Disabilities Act.

Program Accessibility

The City will conduct a self evaluation of all services, policies and practices to determine where there are barriers to full participation. Where there are barriers to full participation, the City will seek to make the necessary modifications, to the extent required by the Americans With Disabilities Act.

Public Notification

The City will make reasonable efforts to notify all applicants, participants or beneficiaries of rights and protections provided to them by the Americans with Disabilities Act and will make available to the public information regarding the program of nondiscrimination.

Designation of a Responsible Employee

The City Manager or designee will select a person to coordinate this program. This person will advise the City Manager on issues relating to accessibility of services and structural modifications.

Adoption of a Grievance Procedure

A grievance procedure will be established by the City Manager to air and resolve any complaints of discrimination based on disability.

Communications with the Public


The City will make communications with applicants, participants and members of the public who are disabled as effective as possible. To accomplish this, the City will make reasonable accommodations, providing appropriate auxiliary aids and services, so that, when reasonably possible, persons with disabilities will have an equal opportunity to participate in and enjoy the benefits of City services, programs or activities.

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The City Manager or a designee will develop guidelines to outline how this plan will be implemented. In order to remain consistent with evolving laws and policies, the City Manager is authorized to modify these guidelines when necessary.

PASSED by the City Council this 16th day of November, 1992,
and signed in authentication of its passage this 16th day of
November, 1992.

(SEAL)


Cary Bozeman, Mayor

Attest:


Myrna L. Basich, City Clerk

CITY OF BELLEVUE, WASHINGTON

PROCLAMATION

- Whereas:*** The Americans with Disabilities Act (ADA) was signed into law on July 26, 1990, to ensure the civil rights of people with disabilities and establish a clear and comprehensive national mandate for the elimination of discrimination against individuals with disabilities; and
- Whereas:*** The ADA has expanded opportunities for Americans with disabilities by reducing barriers, changing perceptions, and increasing full participation in community life; and
- Whereas:*** The City of Bellevue has consistently and diligently worked to make all its, programs, services and facilities accessible to people with disabilities; and
- Whereas:*** The City of Bellevue has for over 30 years provided adaptive recreation programs as well as accommodations and access to general recreation; and
- Whereas:*** The City of Bellevue developed an innovative and efficient survey method for its award-winning September 2009 ADA Sidewalk and Curb Ramp Self-Evaluation report; and
- Whereas:*** The City of Bellevue hired a dedicated ADA Coordinator in May 2015 and increased funding for access as part of its Diversity Advantage Program; and
- Whereas:*** On the 25th anniversary of the Americans with Disabilities Act, the City of Bellevue will celebrate and recognize the progress that has been made by reaffirming the principles of equity, inclusion and access, and renewing our efforts to reach full ADA compliance;

Now, therefore, I, Claudia Balducci, Mayor of the City of Bellevue, Washington, on behalf of the City Council, do hereby proclaim the week of July 20-26, 2015 as:

ADA Anniversary Celebration Week

and urge all residents of Bellevue to continue to recognize and value the contributions of people with disabilities to our city and community.

Claudia Balducci
Mayor

**Public Meetings on ADA Transportation Issues
Highland Community Center, Bellevue, WA**

**December 10, 2007, 11:30 – 12:30
Audience: Seniors and Mobility Impaired (3)**

**December 11, 2007, 6:39 – 8:00 p.m.
Audience: Blind (2)**

**December 13, 2007, 6:30 – 8:00 p.m.
Audience: Deaf and Deaf-Blind (5)**

Sessions were advertised in Bellevue Reporter and on the city website and promoted through the Highland Community Center network.

Interpreters were provided (total cost \$700).

CURB RAMPS

**Q. What is experience with diagonal versus perpendicular ramps?
(diagram provided in appropriate formats)**

- Perpendicular are preferred at intersections.
- Diagonal ramps force blind people into the street because they use the ramps to navigate the intersections.
- Diagonal ramps make it difficult to square up with the crossing.
- Dogs are trained to go for the ramps.

Q. If corner has a diagonal ramp, what would help to square up?

- Poles are used as a straight edge.
- Lucas Frank, at Seeingeeye.org, is looking at ways to standardize the transportation experience for blind people and elderly people who have limited sight.

Q. What other experiences/suggestions do you have regarding intersections and crossings?

- Tactile signals are not always in a predictable location, making it difficult to find them.
- There are no tactile signals at the Bellevue Transit Center.

- Sight/hearing impaired users need to know if ramp is close or not close to a post or vibrating signal.
- Any tactile device needs to be within reach of the normal pedestrian pathway.
- It is easy for blind pedestrians to lose their directional orientation in “scramble” intersections.
- Need to include cross-hatched paint marking inside crosswalk instead of just the two parallel lines that mark borders of the crosswalk.
- It is important to have color contrast of ramp as opposed to color of adjacent sidewalk. Yellow seems to be the standard color and evidently works okay for most users, although white is more visible at night. .
- It is very important for blind population to have prompt maintenance and repair of pedestrian signal activation buttons.
- There should be some sort of electronic notification in our signal system to alert us to inoperative pedestrian signals and buttons.
- Regarding sidewalk corners, it is much harder for a blind pedestrian to gain directional orientation on a rounded corner as opposed to square/pointed corners.
- Need to have visual orientation to top step of any stairway for partially sighted pedestrians so it is important for hand railings to always align with stairways.
- Do not put trash cans at the end of a stairway hand railing.
-

SIDEWALKS

Q. What sidewalk features work and don't work?

- Sidewalks with large open areas and driveways with no distinctions are very disorienting. They need texture (grooved but not too deep) or color/pattern.
- Tree wells are hazardous. They are easy to step in even with a dog and canes often sweep over and don't pick them up. They're a big problem for wheelchairs.
- Gratings are okay holes are small enough.
- Keep tree branches clipped.
- Big problem when bicyclists use the sidewalks when there are no bike lanes – this is a big problem on Bel-Red around 140th Avenue NE.

Construction Zones:

Q. Bellevue is in a construction boom. What helps in construction zones and sidewalks?

- Cone barriers and mesh fences are no good. The blind need some sort of solid barrier, like a board, for cane contact and orientation.
- The signs are a real hazard – big metal feet stick out and are a trip hazard, the points of diagonal signs stick out into the pedestrian pathway and can't be seen.
- When pathway is not clear, dogs get confused. It is best at sites where there are members of the crew who can help people with disabilities.
- Pathways created by jersey barriers are best, where possible.
- In general, construction crews could benefit from blind awareness training.
- Overhangs, like with scaffolding, are difficult and are seldom marked well.
- Make sure metal cover plates don't shift and leave an open pit.
- Use lots of fluorescent orange lighting for marking (with a slow flash so it's not too annoying for sighted drivers).

Q. How can we better inform people about sidewalk closures?

- wcb.org and nfb.org.
- Radio public service announcements;
- Evergreen reading service through Seattle Library.
- There's also programs that change website text into audible.
- Make liberal use of yellow safety tape.
- Need to pre-think pedestrian corridors so that blind pedestrians are alerted before coming into a construction zone. This could be done with flashing lights and some sort of tactile signal with up-raised arrow directing pedestrian to the right or left.

Priorities:

Q. What types of projects/connections should be prioritized?

- Transit Centers, crossings and curb cuts need to be very clear.
- Community Centers
- Think safety first
- Consistent signage is needed all around Bellevue that is well lit and uses high contrast lettering.
- At parking garages there needs to be an indication for cane users that the sidewalk has transitioned into a driveway. True of driveways in general.
- Bellevue Square, the Overlake/Sears area, and Eastgate (Park 'n Ride) are confusing so could use improvements.

- Bel Red Corridor, 148th/NE 24th . The congestion makes it difficult.
- First ADA improvements should be done in the area of the Bellevue Transit Center which is heavily utilized by the deaf/blind population.
- Improve lighting between Bellevue Transit Center and Bellevue Square. This area is bad because of stairs and meandering pathway.
- There is no signage oriented to pedestrians along pedestrian corridor. Need something to confirm to blind pedestrians that they are headed in the proper direction.
- There is no pedestrian signage at 101st Ave NE and NE 8th Street directing pedestrians to Bellevue Square. Signage here is important because this is the bus stop recommended by the Metro route planner to get from Seattle to Bellevue Square.
- Create an ADA demonstration model using the Bellevue Transit Center, then implement the lessons of that model in the rest of Bellevue.

Other Comments

- Signage in Bellevue is not consistent. Sometimes one sign seems to block other signs.
- Signage needs to be of uniform height, possibly with lighting to illuminate the sign itself.
- Private properties should be required to follow ADA guidelines.
- Roundabouts are nearly impossible for blind people to navigate.
- Transportation design engineers and city leaders should attend these public meetings to experience what blind people go through in life.



City of Bellevue **OPEN HOUSE**

Share • Learn • Do

Wednesday, April 29, 2009 • 4 – 7 pm, Bellevue City Hall

What is ADA?

The Americans with Disabilities Act (ADA) guarantees equal opportunity for individuals with disabilities in public accommodations, employment, transportation, government services, and telecommunications.

The City of Bellevue invites you to Share...Learn...Do, an open house designed to engage you in our efforts to ensure the city's programs and facilities are accessible to all residents.

SHARE:

- Talk with City staff about your experiences with accessibility in Bellevue
- Complete an ADA Accessibility in Bellevue survey
- Tell us more by completing an Open House Comment Card

LEARN:

- Talk with representatives from community organizations
- See how technology helps you navigate construction zones and intersections
- Attend presentations and demonstrations of products and services available to you

DO:

- Sign up for programs offered by the Parks Department
- Locate the places you travel most on our interactive mapping system
- Play a hole of miniature golf
- Try out the Assisted Listening service in the City Hall Council Chambers

And much more!

Unable to attend?

We would still like to hear from you! Complete the survey on-line at: http://www.bellevuewa.gov/accessibility_intro.htm (other formats available upon request)

How will my comments help?

Your comments will help to identify what is working and where accessibility barriers to city programs and facilities limit your participation. We will also use your input to prioritize what improvements within the city's updated ADA Transition Plan.

Questions & Comments?

If you have questions or comments, please contact Yvonne Tate at 425-452-4066 or Ytate@bellevuewa.gov

City Hall & Parking: City Hall is located at 450 110th Avenue NE near the Bellevue Transit Center. Parking is available on a first-come, first-served basis, and is free to those doing business with the city or attending meetings at City Hall.

Accessibility: American Sign Language (ASL) interpretation will be available. City hall is wheelchair accessible.

This information will be provided in alternate formats for individuals with disabilities upon request. We invite everyone's participation, please contact Kim Indurkar for accommodation requests at 425-452-6105 or Kin-durkar@bellevuewa.gov. Assistance for the Deaf/Hard of Hearing can be provided through the 711 Telecommunications Relay Service.

Title VI Notice to the Public It is the City of Bellevue's policy to assure that no person shall on the grounds of race, color, national origin or sex, as provided by Title VI of the Civil Rights Act of 1964, be excluded from participating in, be denied the benefits of, or be otherwise discriminated against under any of its federally funded programs and activities. Any person who believes his/her Title VI protection has been violated may file a complaint with the Title VI Coordinator. For Title VI complaint forms and advice, please contact the Title VI Coordinator at 425-452-4270.

City of Bellevue ADA Survey

In May and June, 2009 the City of Bellevue partnered with King County Metro Accessible Services to survey more than 800 Bellevue residents who use the Metro Access paratransit service. The purpose of the survey was to evaluate the current level of accessibility in the city so that identified areas of improvement could be prioritized as part of the city's updated Americans with Disabilities Act (ADA) Transition Plan.

A total of 819 surveys were mailed (60 were returned because of insufficient or forwarding addresses). The 759 surveys successfully delivered generated 110 responses for an overall rate of 14.5 percent.

SUMMARY OF SURVEY RESPONSES BY QUESTION

1) In general, how accessible is the city for you?

#	%	Response
10	9.1	Did not answer/Not applicable
5	4.5	1: Not at all accessible
12	10.9	2: Somewhat accessible, but still some major challenges
31	28.2	3: Generally accessible, but could be improved
38	34.5	4: Accessible with few challenges
14	12.7	5: Highly accessible
3.44		AVERAGE SCORE

2) How accessible are city buildings for you?

#	%	Response
16	14.5	Did not answer/Not applicable
5	4.5	1: Not at all accessible
12	10.9	2: Somewhat accessible, but still some major challenges
34	30.9	3: Generally accessible, but could be improved
24	21.8	4: Accessible with few challenges
19	17.3	5: Highly accessible
3.42		AVERAGE SCORE

3) Select the city buildings you visit most often (may select more than one):

#	%	Building
37	33.6	Crossroads Mini City Hall
34	30.9	North Bellevue Community Center
31	28.2	Highland Community Center
15	13.6	Downtown City Hall
7	6.4	South Bellevue Community Center
3	2.7	Fire Station at Crossroads
3	2.7	Fire Station at SE 8 th and Bellevue Way
2	1.8	Fire Station at NE 8 th and 160 th Avenue NE
1	<1	Fire Station at Factoria
1	<1	Police State at Crossroads
1	<1	Police Station at Factoria
36	32.7	Other: Misc. specific "chore" locations
27	24.5	No Response/Not Applicable

**4) Describe accessibility features that are most helpful when you visit these buildings.
(May list more than one.)**

#	%	Accessibility Features
15	13.6	Automatic doors (push button)
14	12.7	Wheelchair ramps
10	9.1	Designated handicap parking spaces
6	5.4	Large, high contrast signs
6	5.4	Smooth walkways/hallways
6	5.4	No stairs/level entrance
5	4.5	Access bus service
4	3.6	Elevators
3	2.7	Good lighting/no glare
3	2.7	Easy to get to
2	1.8	Parking close to door
2	1.8	Access drivers
2	1.8	Building staff
2	1.8	Accessible bathrooms
1	<1	Light traffic in front
1	<1	Wide doors
1	<1	Handrails
1	<1	Valet parking
1	<1	Place to sit and rest along walkways
1	<1	Crosswalk with light
50	45.4	No response/Not applicable

**5) Describe accessibility challenges you face when visiting city buildings.
(Provide building name in your examples)**

85 (77.3%) surveys included no response to this question.

- I would like to see RFID tags imbedded on every door and a standard reader with GPS linked to floor plans so I could find entry door, bathrooms, and avoid closets
- The downtown city hall is not at all accessible because there is no way I can roll my wheelchair. Restrooms doors are hard to get into - a couple of times I was sitting naked on the toilet and someone just came in because the lock is not working appropriately.
- Too many steps at downtown city hall. (2 surveys)
- Construction projects near Highland Center are hard.
- Crossroads has too many tables and chairs to navigate. (2 surveys)

A small subset (3) listed only the buildings where they have issues, but did not indicate what challenges they faced. The buildings listed were:

- North Bellevue Community Center
- Fire Station at NE 8th Street and 160th
- Bellevue Square Mall

The remaining respondents listed the challenges they face, but did not tie them to specific buildings. Because these respondents all indicated multiple buildings in Question 3, a correlation was not possible. The issues were:

- Not enough handicap parking (4 surveys)
- Entrance too far from parking (3 surveys)
- Restroom doors difficult to use (2 surveys)
- Too many hills approaching building (2 surveys)
- Too confusing to figure out where the Access drop off and pick up locations are
- Automatic door openers need to be placed 10' in front of the door at minimum.

6) How accessible is parking at city buildings?

#	%	Response
53	48.2	Did not answer/Not applicable
8	7.5	1: Not at all accessible
7	6.4	2: Somewhat accessible, but still some major challenges
18	16.4	3: Generally accessible, but could be improved
15	13.6	4: Accessible with few challenges
9	8.2	5: Highly accessible
3.18		AVERAGE SCORE

Describe experiences with parking (Provide building name in your examples)

- Good at Highland Center
- Library often does not have enough spaces.
- Crossroads <Mall> could use more handicap parking spaces (3 responses)
- The parking garage at Overlake Hospital is very busy and somewhat frightening because of my age and reflexes.
- GHC -- often all the handicapped spaces are full.
- I have a permit - sometimes some <people> who do not need these special spaces is there.
- Too many people use their relatives' placard to park in disabled spots. There is no way to stop this as it is not a 911 call, but still a gross slap in the face of the law.
- Improvement through monitoring of qualified users.
- Difficult to find parking entrances
- Not enough street parking
- More handicapped parking spaces (3 responses)

7) When you interact with city staff, do you feel you are treated fairly?

	Yes	No	No Response NA
When applying for city jobs	5	5	100
With police and fire personnel	42	1	67
When requesting information	58	4	48
When requesting accommodations	26	5	79

8) How can we improve interactions with city staff for you?

- City staff is really good/great (6 responses)
- Good experience with 911
- The Highland center staff's awesome for my needs
- On rare occasions I phone for information and am treated very well
- I recently required information from City of Bellevue Utilities about rulings for down drains on my neighbor's home. I needed information to find that rule in Bellevue's code. The person I spoke to was extremely helpful and nice. Very helpful!
- A courteous approach to tax payers
- Bilingual staff (2 responses)

- Doing great but less "menus" to deal with when calling would be great.
- Whenever we call we get voice mail; no one calls back. We were told it is illegal to e-mail and answer the e-mail.
- Real life person on phones
- Speaking louder and slower -- eye contact
- Pre-recorded "how to" messages
- Keep improving
- Invite us to board meetings when disabled issues are on agenda
- Crossroads staff not always knowledgeable. Didn't follow through.
- Get the Street Maintenance Dept. to follow through when city staff says they'll take care of it.
- Make all city staff aware of developmentally disabled handicaps with walker and limited speech.
- Please ask them to respect that everyone has different behaviors. People act differently and have different problems.
- Make people stop at crosswalks.

ABOUT ACCESS

Train personnel better to work with customers (i.e. have Access customer service and route planners go on the access bus so they can understand the problems that are avoidable.)

9) Have you ever visited the city's website? 18 (16.4%) responded Yes.

If yes, how accessible was the website for you?

#	%	Response
87	79.0	Did not answer/Not applicable
3	2.7	1: Not at all accessible
3	2.7	2: Somewhat accessible, but still some major challenges
4	3.6	3: Generally accessible, but could be improved
7	6.4	4: Accessible with few challenges
6	5.4	5: Highly accessible
3.43		AVERAGE SCORE

10) What would make the website more accessible?

- I'm not a computer expert but I found the website very comprehensive and easy to browse.
- Being able to find what you need
- Simplicity of location

- Good except make it BELLEVUE.WA.GOV and be sure that all PDF files can be read aloud by ZOOM TEXT by AI Squared and JAWS.
- No ACT text for images
- Include information on accessible sidewalks
- Centralize disability services
- Payment of programs for the disabled via website

11) What information on the website is most important to you?

- Accessibility
- Disability benefits and services
- Finding handicap information
- Activities (2 responses)
- Highland Center activities (2 responses)
- Pool schedule
- Information on programs/recreation for individuals with disabilities (2 responses)
- City development activity
- Code complaints
- Planning
- Transportation changes (Bel-Red, light rail, East Bellevue and ped-bike)
- Would be nice to know where buildings with covered sidewalks are
- Parks info
- Police actions
- Medical and healthcare
- Small business taxes

12) How accessible are City parks for you?

#	%	Response
22	20.0	Did not answer/Not applicable
8	7.3	1: Not at all accessible
10	9.1	2: Somewhat accessible, but still some major challenges
22	20.0	3: Generally accessible, but could be improved
18	16.4	4: Accessible with few challenges
30	27.3	5: Highly accessible
3.59		AVERAGE SCORE

**13) Describe accessibility challenges you face when visiting city parks.
(Provide park name when providing examples)**

- Parks have good sidewalks, clean and well-paved.
- Good accessibility at Crossroads new park
- Downtown Bellevue Park (4 responses)
- Downtown Bellevue Park - there is no entrance on NE 1st Street - just a parking lot which we have to use to enter park. Disabled and women with children all use the parking entrance
- Downtown Park is not real smooth.
- Not enough ways to go, especially out of parking lot in downtown Bellevue.
- Crossroads (2 responses)
- Crossroads Park - Hard to find restrooms
- Newcastle
- Robinswood Park -- the wooden deck is hard for wheels to get on. The trails are unsafe because they're so uneven.
- No bathrooms or benches enough in Robinswood Park. Need lights in winter for dog park.
- Robinswood (2 responses)
- Bathroom access
- Enough places to sit by the paved walkways
- Need big map at each entrance. Need wayfinding signs on trails.
- Finding a parking space/not enough spaces (3 responses)
- Handicap parking, such as for the Strawberry Festival (Crossroads Park) and the 4th of July (Downtown Park).
- Slopes and uneven grades (2 responses)
- There should be more paved paths so I could go with my four wheel walker with padded seat.
- Steps
- Walking distance
- Public transportation not available
- Activities for Spanish people

14) Have you ever participated in a Parks Department program, class, or activity?

31 (28.2%) responded Yes.

If yes, how accessible were the programs for you?

#	%	Response
74	67.3	Did not answer/Not applicable
5	4.5	1: Not at all accessible
2	1.8	2: Somewhat accessible, but still some major challenges
6	5.4	3: Generally accessible, but could be improved
9	8.2	4: Accessible with few challenges
14	12.7	5: Highly accessible
3.69		AVERAGE SCORE

15) What did you like most about participating in a Parks Department program?

- Accessibility, respect and accommodations as needed
- Highland Center staff are great. Always patient and helpful -- above and beyond (2 responses)
- All the nice staff and how they help us out
- Staff, equipment, price
- Consistency
- Friendliness (2 responses)
- Very nice teachers
- Bowling
- Walks
- Subject matter
- Strawberry Festival
- We loved the lights at Xmas time at the Botanical Garden - beautiful!!
- Many Choices
- No/Low Fees (2 responses)
- Meeting new people (2 responses)
- Overall planning
- Getting out of the house
- I like to keep busy
- We love the Parks Department programs at Highland Center and NW Arts Center. They "make a life" for our brain-damaged daughter.
- Provides recreation for the developmentally disabled (but programs are too crowded)
- They are set up for disabled people

16) What can the city do to make it easier for you to access and participate in future programs and activities offered by the Parks Department?

- It can't get much easier
- Bilingual staff
- Develop activities for Spanish speaking people
- Keep activities free
- Get more teachers, i.e. instructors, maintenance...
- Offer more free classes
- More programs
- Give a lot of advance notice and direction
- Mailer with activities (2 responses)
- Inform about programs in accessible format
- More publicity and information
- Provide exact address of park so Metro Access will pick me up.
- Provide a person/expert who encourages individuals with disabilities or show them how to get involved.
- Bus route on Highland Drive
- Improve bus accessibility
- Make the Downtown Park easier for chairs.
- Manual wheelchair accessible
- Parking for the truly handicapped (2 responses)
- Tow away people who use handicap spaces -- those who are not handicapped

FOR ACCESS

- At time the Access bus is slow, but overall a good job.
- Wait time and ride time on Access busses are too difficult and long for people with Parkinson's disease. A major condition is the extreme fatigue, balance issues, and often cognitive confusions.

17) How accessible are city sidewalks/curb ramps?

#	%	Response
18	16.4	Did not answer/Not applicable
6	5.4	1: Not at all accessible
12	10.9	2: Somewhat accessible, but still some major challenges
22	20.0	3: Generally accessible, but could be improved
36	32.7	4: Accessible with few challenges
16	14.5	5: Highly accessible
3.48		AVERAGE SCORE

18) What conditions related to the accessibility of sidewalks/curb ramps do you find the most difficult? Select the top three challenges you face. (Many selected more than 3)

#	%	Public Rights of Way Accessibility Features
50	45.4	Uneven sidewalks
38	34.5	Steep slopes on sidewalks
31	28.1	Narrow sidewalks
32	29.1	Obstructions along sidewalk
31	28.2	Intersections difficult to cross
21	19.1	Lack of curb ramps
16	14.5	Lack of crosswalk stripes
15	13.6	No pedestrian signals
16	14.5	No audio pedestrian signals
4	3.6	Lack if sidewalks in neighborhoods
2	1.8	Lack of parking
2	1.8	Potholes
1	<1	Gravel
1	<1	Not enough light
1	<1	Driveways
24	21.8	No response

19) Which destinations do you visit most often? Please select the top three destinations you visit.

#	%	Public Rights of Way Accessibility Features
70	63.6	Neighborhood stores and services
45	40.9	Major activity centers, i.e. malls
41	37.2	Downtown Bellevue
23	20.9	Transit stops/centers
21	19.1	Government buildings/community centers
17	15.4	Other: Misc. specific "chore" locations
2	1.8	Employment centers
17	15.4	No response

20) When you have encountered a construction site that blocks the sidewalk/curb ramps, did you find the path of travel/detour:

	Yes	No	No Response NA
Clearly marked and easy to understand	53	17	40
Convenient	30	32	48
Safe	40	24	46

21) How can the city make construction sites more accessible for you?

- By putting up clear detour signs - make sure they open wheelchair accessible sides
- Keep their construction signs out of the middle of the sidewalk and curb ramps.
- The construction signs should not be both blocking the bike lane and in the way of the sidewalk. I hate them because once it struck me for being on the bike lane and blocking the sidewalk at once.
- This situation is always stressful. Have a clear path indicated with multiple "disabled route" signs. Try to avoid narrow and/or uneven surfaces. Ask workers to respect and offer help if needed.
- Clear/distinct signs (2 responses)
- When cones are used to create walkway on street, put signs with PED and arrow of where to go. Could do the same with CAR and an arrow. That way I know if a row of orange cones is to stop me or traffic! First time at Microsoft building by City Hall I kicked aside cones so I could get out of street just to discover I need to cross through them again to get to covered ped path!
- Signage farther from site to warn of closure (2 responses)
- Make it easier to get around them or a quicker "sign" that they're there
- See that they have a ped crossing in the area.
- They should have a detour really close by.
- Something that flags the construction side easily for walkers.
- Daily inspections
- Do late night/weekend work (2 responses)
- Less construction and faster completion times
- Finish the project quickly
- Less grade changes
- Walkways flat and even
- Live assistance
- Have traffic-control person assist when their activities block paths.
- Make it disabled friendly

- More Police in mall parking lots. Some people will stop at crosswalks sign for the handicap people at Crossroads Mall they do not stop. I am handicapped and I almost got hit more than one time. Please help us.

22) Please share accessibility difficulties or constraints along pedestrian routes you normally take.

- 102nd Avenue SE: Sidewalks torn up at construction sites.
- 10546 SE 16th Street - there is no sidewalk on my side of the street which makes it hard to walk down the hill with a wheelchair
- 110th Avenue: Too much construction work and not enough consideration for pedestrians!! From 2nd to Mail Street TOTAL DARKNESS on 110th Avenue NE!!
- 116th Avenue NE about 10th Street - The stop for Overlake and Group Health has a ramp that slopes from the sidewalk enough to cause me to lose balance as I start to cross 116th. I wear a leg brace that does not bend.
- 116th Avenue SE and Main near the botanical gardens
- 126th Street NE and NE 6th Street - Needs sidewalk - walking back on forth on this street is important exercise for me
- 146th - Need lighted cross walks
- 140th and Bel-Red Road
- 140th Avenue NE and Bel-Red – needs pedestrian crosswalk because it is very hazardous near parking access to Safeway
- 148th and 6th street is on a hill. If Bellevue was not on a hill, I would go more places.
- 148th/Main Kelsey Creek Shopping Center - broken up sidewalk
- 148th Avenue - Crossing from Fred Meyer to Sears or that area of shops
- 156th/SE 12thish - No sidewalk
- 156th and 8th Street - Not enough time to make the crossing
- 156th Avenue & NE 8th Street - Crossroads area and parking lots.
- 16240 NE 14th Street Woodside East - No Street number sign
- 164th from Lake Hills to NE 8th - there is only a sidewalk on one side so twice the pedestrian traffic - narrow for other wheel chairs, strollers, etc.
- 2nd Avenue and 107th Avenue NE
- 38th and 36th Streets - Cars go too fast and don't see me in crosswalk
- 99th - No sidewalks on one side
- Bellevue Way -- Crossing light too short - Cannot make it even with help. NE 8th Street – Same

- Bel-Red Road (by Highland Center or YMCA) - Lots of fixes on the roads or streets that don't last
- Factoria Boulevard at the theater is a bad intersection
- Highland Drive - Steep slope and no public transportation
- Lake Hills Boulevard from 164th to 156th - Cars parking with 2 wheels on the sidewalk or blocking sidewalks in driveways.
- Lake Hills Connector south of SE 7th Street - no bus shelter on either side
- Lake Washington Blvd and 99th
- Main Street east and west - there isn't a sidewalk in some areas.
- Main Street and 102nd - my Access bus has to stop traffic to load and unload me and my wheelchair.
- NE 16th from 148th to 156th - There should be sidewalks.
- NE 8th Street from 148th to 156th - the curb cuts are too high, easily wheels can roll toward the street.
- NE 4th and 110th, NE 2nd and 110th, Ne 2nd and 112th - No audible signals, no enforcement of crosswalk pedestrian right of way
- NE 8th (south side between 120th and 116th) - Car dealer blocks sidewalk
- NE 8th and 124th NE, NE 10th Street, 10th Place and Bel-Red
- NE 8th Street and 156th Street at Crossroads Mall in Bellevue are real bad for walker and wheelchair.
- NE 8th Street and 110th Avenue Ne - Very steep slopes to cross road.
- NE 23rd and 100th Avenue NE -Bushes obstructing, no enforcement of pedestrian right of way, no zebra
- SE 16th and 10th
- SE 16th and Bellevue Way
- SE 7th Street between 128th Avenue Se and Lake Hills Connector - no street lights, no raised curb and sidewalk, no railings
- Streets are not the problem. It is the transition between the city and private property.
- Bellevue Square Mall skybridges and entrances

23) Describe the most important action the city can take to increase accessibility of its facilities, program and services, and sidewalks/curb ramps.

- Keep ADA concerns in all projects

- Add sidewalks in my neighborhood (4 responses)
- More room on sidewalks. Some of the sidewalks are cracked and deteriorating. Some of them will stop the chair from moving.
- Complete accessibility audit of crosswalk and curbs
- Review ramps now in use. Heavy sidewalk traffic may need more.
- Paint curbs
- Often trim brush/branches over sidewalk.
- Remove uneven sidewalk
- Crossing signals -- especially on wide streets are too short and I get in the middle and then light changes. People actually beep their horns. I wish I could go faster! On wide crossings - the light should given more time.
- Audio pedestrian signals
- Red "stop" sign comes on almost instantly after "walk" signal
- Developmentally disabled people with walkers can press a button to make the crossing safer.
- Designate "wheelchair accessible" paths Provide someone to ask if help is needed or someone to suggest where to sit or which path to go on.
- Mark the areas that designates the street from the sidewalk. You can't tell when the street ends and the sidewalk begins at night.
- Fix those bad curb cuts by making them more even.
- Have more cut outs on sidewalks
- Improve curb ramps
- More handicapped parking spaces. Enforce the ruling (2 responses)
- Police enforcement
- Have store owners clearly mark accessible parking spaces. City increase their enforcement of wheelchair parking spaces or do what Portland does, have wheelchair only spaces.
- More room on sidewalks. Some of the sidewalks are cracked and deteriorating. Some of them will stop the chair from moving.
- Uneven surfaces are difficult to manage in a chair -- and when able to use a cane, I must watch carefully for that! Curb cuts more often. More safe and LONGER crosswalk options
- Garbage bins left right on sidewalk.
- Devise a method to fine violators of disabled parking spots. Citizen cops? Photo arrest option where someone can make citizen arrest with digital photo?
- Enforcement - no parking on sidewalks
- Have BPD enforce speed limits

- At present I do not get channel 21. That was where I could be notified of programs, services etc. along with discussions regarding tunneling and light rail through downtown Bellevue. Hopefully broadband will resume broadcast on Channel 21.
- Bus
- More user friendly
- Make all parks and parking more wheelchair accessible.
- Bathrooms at Robinswood Dog Park
- Make doorways wider at Hero House.

FOR ACCESS

- Access is used for people with severe disabilities. My disabilities are poor visions, restricted mobility and old age (88). The elderly could use this help because of their dependency on others to get to appointments.
- Decrease wait time for and ride time on Access busses

24) Please share other comments, experiences, recommendations related to the accessibility of Bellevue facilities, programs and services, and sidewalks/curb ramps.

- Excellent city - lived here since 1960
- Crossroads Mall is truly disabled friendly with few exceptions. Thanks for asking!
- I attended the ADA conference last month and was impressed with Department of Transportation concerns and actions
- Look at using seniors to monitor the use of handicap spaces. Even issuing tickets! Other cities do (included windshield card for handicappedfraud.org)
- Crossing 405 at NE 8th is not very safe
- Of importance to me was the suggestion part which I would like to repeat to you: I wish you would consider a crosswalk for pedestrians at the intersection of 107th Avenue Ne and 2nd Avenue in Bellevue for us invalids.
- Many sidewalks are broken and uneven leading to tripping. Bicycles are very dangerous when they are on sidewalk passing from behind with no notice at high speed.
- Need smooth transition at curb cuts
- Sidewalks on one side of the street in some areas. It would be nice to have sidewalks on both sides of the street.
- Older people take longer to cross a street than the allotted amount of time.

- They are pretty good in most areas but there are a lot of places still miserable for a "wheelchair" like me -- especially more construction sites.
- Educational programs for adults
- Employees could be more accommodating, i.e. suggesting times of events

FOR ACCESS

- Access bus is great. Dispatcher could combine pick-ups and returns better. Times when they pass my home twice because it is not in that order on the manifest -- waste of time and tax money.
- I have a deep feeling of gratitude for the services of the Access Bus - the drivers are always cheerful, considerate, courteous, and helpful -- my trips to shopping and whatever medical I requests are always cared for promptly and helpfully.
- Need Access times for rides and waits decreased to 30 minutes whenever possible.
- There are some volunteer programs but too many elderly to be served. There are often several empty seats on most Access buses. If the elderly didn't require private transportation this could help traffic congestion. Very few elderly can safely use public transportation.

B. Pedestrian Access During Construction Projects

Updated August 2015

The following standards apply to City of Bellevue crews, contractors working within the City, and others working within the City's right of way to ensure pedestrian safety and access:

MAINTAIN A CLEAR AND ACCESSIBLE PEDESTRIAN CORRIDOR

The Contractor or permittee shall maintain an accessible corridor that provides at least one safe path of travel for all pedestrians at all times for the duration of the project.

- The pedestrian corridor shall be a width of 5 feet whenever feasible, and shall conform to ADAAG guidelines. It shall not be less than 4 feet wide at any single point.
- The accessible pedestrian corridor shall connect with facilities throughout the project area.
- Equipment, debris, construction materials or vehicles shall not obstruct the corridor.
- No parked vehicles shall obstruct designated handicap parking spaces unless permitted by the City.
- Temporary closure of designated pedestrian routes and crossings shall be allowed only when flaggers are present and safely directing pedestrians around hazards.

TEMPORARY RAMPS MUST CONFORM TO ACCESSIBILITY STANDARDS

The Contractor or permittee shall install and maintain temporary concrete, asphalt or wood ramps to provide a safe path of travel for mobility-impaired pedestrians at all locations where ramps have been temporarily removed OR needed to route pedestrians.

- Temporary ramps shall be constructed so that installation and removal will not damage existing pavement, curb or gutter.
- Ramps shall have a minimum 4 feet wide walking surface and slope not to exceed 8%.
- Ramps shall snugly meet existing surfaces without gaps. When required for drainage, Schedule 40 PVC pipe (min. 2") shall be installed through ramp.
- Transitions between ramps and the street surface shall be smooth such that no lip exists at the base of the ramp.
- Sides of a ramp shall be protected where there is any drop-off.

IDENTIFY A SAFE PATH OF TRAVEL

If a portion of the pedestrian way is rerouted due to construction, the path of travel shall be clearly defined.

- At no time will the sidewalks on both sides of the street, within the same block, be closed at the same time.
- Pedestrian access corridors shall be clearly delineated with cones, barrels, barricades, or fencing as approved by the Engineer.
- If a crosswalk is closed, curb ramps leading into that crosswalk must be barricaded in such a manner that walkways that are not closed remain accessible.
- Caution Tape shall not be used by itself to delineate the path of travel or create a barricade.

B. Pedestrian Access During Construction Projects (cont'd)

Updated August 2015

CONSTRUCTION OF SIGNPOSTS, BARRICADES, AND FENCING

Impenetrable barricades shall be used to separate pedestrians from hazards on all sides of excavations that may be exposed to pedestrians. Use materials and methods suitable to site conditions. Signs and fencing material shall not protrude into the clear pathway.

- Paths of travel that do not continue to the next corner or to a safe crosswalk shall be closed to pedestrian traffic. Signs must be posted stating that the sidewalk is closed and must detour pedestrians to accessible sidewalk.
- A-frames used for defining path of travel placed end-to-end without spacing, shall be connected and maintained to ensure stability to help a sight-impaired person negotiate a safe path when using a cane. Any barricade or fencing requires a minimum 3 inches high, solid, uninterrupted toe-board.
- Signposts, scaffolding and fencing supports shall be placed entirely outside the pedestrian path of travel, minimum 4 feet wide and 80 inches high without obstruction.
- Construction barriers shall be maintained in a sound, neat, and clean condition.

SURFACING OF PEDESTRIAN CORRIDORS

During construction, tripping hazards and barriers for people with mobility impairments must be removed to maintain an accessible pedestrian corridor.

- Any change of level which exceeds 1/4" height must be beveled at 45 degrees.
- Closed trenches, temporary paving surfaces, walking surfaces, steel sheets, etc. shall have a smoothly finished, firm walking surface made even with surrounding walkways. Compacted gravel is not considered an acceptable walking surface.
- Aisle or loading area adjacent to a parking space is part of the pedestrian corridor.

RESTORATION OF PEDESTRIAN ROUTES

After construction, the site shall be returned to its former condition, or new condition as required.

- Temporary ramps shall be removed as soon as construction and approval of permanent ramp is completed. The sidewalk must be opened as soon as possible.
- After work is completed, the surface of the pedestrian path shall be restored free from all ridges, gaps, bumps and rough edges.
- Construction that affects an existing curb ramp shall include replacement or repair of the curb ramp to meet current City standards.

Note: The City may stop work when any hazardous conditions are present!

7.00.060 DEAF AND HARD OF HEARING PERSONS

It is the policy of the Bellevue Police Department to ensure that a consistently high level of service is provided to all community members, including those who are deaf or hard of hearing. This Department has specific legal obligations under the Americans with Disabilities Act and the Rehabilitation Act. To carry out these policies and legal obligations, the Department instructs its officers and employees as follows:

- ❖ People who identify themselves as deaf or hard of hearing are entitled to a level of service equivalent to that provided hearing persons.
- ❖ The Department will make every reasonable effort to ensure that its officers and employees communicate effectively with people who have identified themselves as deaf or hard of hearing.
- ❖ Effective communication with a person who is deaf or hard of hearing involved in an incident whether as a victim, witness, suspect, or arrestee is essential in ascertaining what actually occurred, the urgency of the matter, and type of situation.
- ❖ Various types of communication aids known as “auxiliary aids and services” are used to communicate with people who are deaf or hard of hearing. These include use of gestures or visual aids to supplement oral communications; an exchange of written notes; use of a computer or typewriter, use of assisted listening devices (to amplify sound for person who are hard of hearing); or use of qualified oral or sign language interpreters.

The type of aid that will be required for effective communication will depend on the individual’s usual method of communication, and the nature, importance and duration of the communication at issue.

In many circumstances, oral communication supplemented by gestures and visual aids, an exchange of written notes, use of a computer or typewriter, or use of an assisted listening device may be effective. In other circumstances, qualified sign language or oral interpreters are needed to communicate effectively with persons who are deaf or hard of hearing. The more lengthy, complex and important the communication, the more likely it is that a qualified interpreter will be required for effective communication with a person whose primary means of communication is sign language or speech reading, for example:

- ❖ If there has been an incident and the officer is conducting witness interviews, a qualified sign language interpreter may be required to communicate effectively with someone whose primary means of communication is sign language.
- ❖ If a person is asking an officer for directions to a location, gestures and an exchange of written notes will likely be sufficient to communicate effectively and a sign language interpreter is often not required.

To serve each individual effectively, primary consideration should be given to the communication aid or service that works best for that person. Officers must ask persons who

are deaf or hard of hearing what type of auxiliary aid or service they need. Officers should defer to those expressed choices, unless there is another equally effective way of communicating, given the circumstances, length, complexity, and importance of the communication, as well as the communication skills of the person who is deaf or hard of hearing.

The Department is not required to provide a particular auxiliary aid or service if doing so would fundamentally alter the nature of the law enforcement activity in question, or it would cause an undue administrative or financial burden. Only the City Manager or his designee may make this determination. For example:

- ❖ If the City has limited financial resources and providing a particular auxiliary aid would cost a large sum of money, the City Manager may determine that it would be an undue financial burden (note: the city's budget as a whole must be considered). In this situation, the most effective means of communication that does not involve an undue burden must be used.

The input of people who are deaf or hard of hearing who are involved in incidents is just as important to the law enforcement process as the input of others. Officer must not draw conclusions about incidents unless they fully understand and are understood by all those involved, including persons who are deaf or hard of hearing.

People who are deaf or hard of hearing must never be charged for the cost of an auxiliary aid or service needed for effective communication.

PROCEDURE:

On-call Interpretive Services

The Department will maintain a list of sign language and oral interpreting services that are available (on-call 24 hours per day) and willing to provide qualified interpreters as needed. Each of these services will be chosen after having been screened for the quality and skill of interpreters, its reliability, and other factors such as cost. The Department will update this list annually.

A qualified sign language or oral interpreter is one who is able to interpret effectively, accurately, and impartially both receptively and expressively, using any necessary specialized vocabulary. Accordingly, an interpreter must be able to sign to the deaf individual (or interpret orally to the person who does not use sign language) what is being said by the hearing person and to voice to the hearing person what is being signed or said by the deaf individual. The interpreter must be able to interpret in the language the deaf person uses (e.g., American Sign Language or Signed English) and must be familiar with law enforcement terms and phrases. Because a qualified interpreter must be able to interpret impartially, a family member, child, or friend of the individual who is deaf may not be qualified to render the necessary

interpretation because of factors such as professional, emotional, or personal involvement, or considerations of confidentiality. Additionally, although a “qualified” interpreter may be certified, a certified interpreter is not necessarily “qualified,” if he or she is not a good communications match for the deaf person (e.g., where the deaf person uses Signed English and the interpreter uses American Sign Language) or the situation (e.g., where the interpreter is unfamiliar with law enforcement vocabulary). Certification is not required in order for an interpreter to be “qualified.”

TTY and Relay Services

In situations when a non-disabled person would have access to a telephone, officers must provide persons who are deaf or hard of hearing the opportunity to place calls using a text telephone (TTY, also known as a telecommunications device for deaf people, or TDD). Officer must also accept telephone calls placed by persons who are deaf or hard of hearing through the Telecommunications Relay Service.

Effective Communications Techniques

Officer must review and have a working knowledge of the Guide for Law Enforcement Officer When in Contact With People Who Are Deaf or Hard of Hearing, a copy of which can be located at the following link: [J:\Legal Info and LEDs](#) This document reviews how officers should communicate effectively in the types of situations officers will encounter. These situations include:

- ❖ Issuing a non-criminal or motor vehicle citation.
- ❖ Communicating with a person who initiates contact with an officer.
- ❖ Interviewing a victim or critical witness to an incident.
- ❖ Questioning a person who is a suspect in a crime.
- ❖ Making an arrest or taking a person into custody.
- ❖ Issuing Miranda Warnings to a person under arrest or in custody.
- ❖ Interrogating a person under arrest or in custody.
- ❖ Types of Auxiliary Aid and Services

Officers must utilize the following auxiliary aids, when available, to communicate effectively:

- ❖ Use of gestures
- ❖ Use of visual aids
- ❖ Exchange of written notes
- ❖ Use of computers or typewriters
- ❖ Use of assisted listening devices
- ❖ Use of teletypewriters (TTY's)
- ❖ Use of qualified oral or sign language interpreters.



HIGHLAND COMMUNITY CENTER PROGRAMS
City of Bellevue Parks & Community Services
14224 Bel-Red Rd Bellevue WA 98007
425-452-4118

Summary of programs offered at Highland Community Center, **not all programs are offered each quarter, please check the current quarter [Connections Recreation & Activity Guide](#), to find out what is being offered.**

Adaptive Recreation Classes: For Adults and Youth with Intellectual disabilities

Adult Adventure Education: This 10-week course is centered on weekly adventures into the community for a day filled with fun and excitement! Participants must register for this course to be entered into the “lottery drawing”.

Saturday Adult Bowling: Come out to Sun Villa and knock down a few pins with your friends, show off your skills and just have fun!

Friday Night Out: Have a nice relaxing evening at Crossroads Mall with dinner and a movie!

Cooking: Learn basic cooking techniques for a tasty meal. Participants will share the meal that is prepared. **Please note:** Participants will only share what is prepared and will want to eat dinner before coming to class.

Social Club: Meet new friends and come out to have a fun and relaxing evening with various indoor activities each week.

Adult Arts/Crafts: Come and get your creative juices flowing and make fun arts and crafts projects!

Movie Time: Movie critics will love our weekly movie film program right before adult social club. Bring a brown sack supper.

Full Fitness Fun: Learn about nutrition, meal planning, exercise and how to live a healthy lifestyle. This class requires commitment to do some form of exercise outside of class time. You will also exercise during class two times a week. We will have a variety of exercise routines to keep you motivated. We will also learn to make good choices in restaurants that taste good!

Adult Softball: Take me out to the ballgame! It's fast, furious and fun. Learn the fundamentals of the game while enjoying team sports.

J rec highland Program descriptions

Bingo: Come try your luck, win prizes (not money). Not everyone will win, but maybe it will be you!

Adult Ballroom Dance: Step out for a fun dance class where the basics of ballroom will be taught.

Cheerleading: Be part of a cheerleading squad and come learn new skills and work as a team. This team will be part of the Eastside Elite program which is the official cheerleading program of the Bellevue Parks & Community Services. This class is open to teens and adults. Tuition includes a Dream team elite T-Shirt. Participation in performances is optional.

After School Programs for Youth: Highland Community Center offers after-school programs for children with disabilities from 2:30 to 5:00 pm, on Monday, Tuesday, and Thursday

Adult Soccer: Exercise and fun all rolled into one! New players at all levels of ability are welcome. We practice twice a week. Special Olympic competition is optional. Our coaches provide leadership at the Special Olympic tournaments. If a participant needs assistance with toileting, eating, dressing, or severe behavior intervention, an assistant must accompany that participant during their stay at the tournaments.

Adult Swing Dance: Learn the moves from the 30's to the 90's, from Benny Goodman to Elvis to The Backstreet Boys.

Highland Hangout: Highland is offering a new program for teens and adults with developmental disabilities. Want something fun to do after work or school or you just want to come early? Now you have the chance to come to the Highland Center and hang out with friends. A variety of activities will be available including movies, games, reading materials, crossword puzzles. There will be something for everyone to do. Bring your dinner or snacks to eat before your evening programs begin. Participants must be able to self motivate, as this program will not have staff to supervise. Wandering around the building will not be allowed. A bonus on Tuesdays and Thursdays you also have the option to go to the gym and shoot hoops for free! No additional cost to use the gym. Ages 16 up

Adult Basketball: Exercise and fun are rolled into one! New players at all levels of ability are welcome. We practice twice a week, and Special Olympic competition is optional. Coaches provide leadership at the Special Olympic tournaments. If a participant needs assistance with toileting, eating, dressing or severe behavior intervention, an assistant must accompany that participant during their stay at the tournaments.

Adult Track: Exercise and fun all rolled into one! New players at all levels of ability are welcome. We practice twice a week. Special Olympic competition is optional. Our coaches provide leadership at the Special Olympic tournaments. If a participant needs assistance with toileting, eating, dressing, or severe behavior intervention, then an assistant must accompany that participant during their stay at the tournaments.

Hoop time: Thursdays Highland now has open gym time for teens and adults with disabilities to shoot hoops. This is a free unsupervised program where no organized games will be played. This is just a fun time to come and shoot around. Ages 16 and up

Artistic Inspirations: This evening art class is for the more serious artist. Each week a different medium will be taught from watercolor to colored pencil drawings and much more.

J rec highland Program descriptions

Fun with Technology: Bring your laptop or I pad and learn all the fun you can have using your personal devices.

Adult Country line Dance: Learn to line dance in a fun atmosphere. Get ready for the barn dance by taking this class.

Adult Volleyball: Enjoy this sport twice a week on Tuesdays/Thursdays without the stress of competition.

Cultural Mix Dance: You will learn a little bit of dance and culture from areas around the world. Come and learn how people dance from faraway places.

Video Production: Be a star in your own video, green screen, character creation, storytelling, costume design are just some of the skills you will learn in this class.

Day camps: Each year we offer 7 weeks of camps for youth ages 4-21

Highland Center Picnic and Dances:

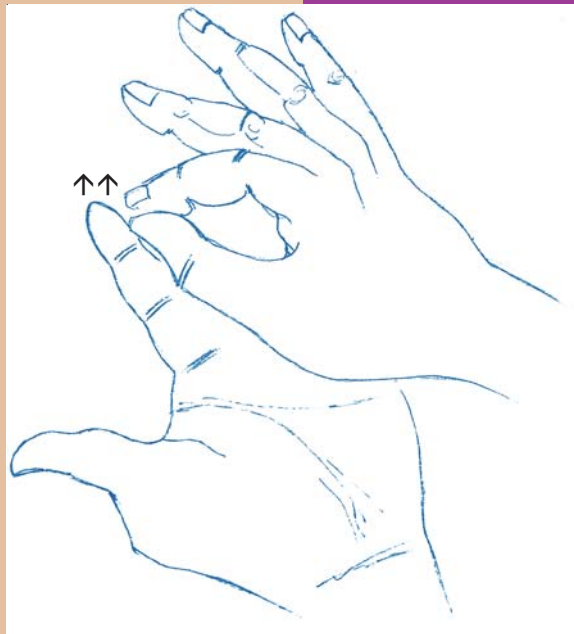
- ☐ **Aloha/Picnic and Dance:** Warm summer evenings, tropical breezes, pineapple, papaya and the annual Highland Center Summer Potluck in conjunction with the Aloha Dance will fill your summer night. Flyers will be posted as to what food/beverage you will need to bring. Potluck 5pm and dance at 7:00pm
- ☐ **Barn Dance:** Mosey on down to the Highland Center for our end-of-the-session dance. Please pre-register for Highland Center dances.
- ☐ **Disco Fever:** Come and show us you're Disco Fever! Dance to the greatest and latest disco music.
- ☐ **Halloween Howl:** Start planning your costume now! Come dance the night away if you dare. Our annual costume showcase will highlight the evening. We'll have witch's brew and spooky delights for all. Must register for dance.
- ☐ **Holiday Ball:** Get out your holiday best and plan an elegant evening or just come as you are. Bring a non-perishable food donation to be given to the Multi-Service Center food bank to help during the holiday season. For teens and adults with developmental disabilities. Must register for dance.
- ☐ **Valentines Dance:** Cupid brings chocolate and fun times to Highland. Come and dance, dance, dance.
- ☐ **Seafair Cruise:** This annual event serves individuals over the age of 16 living with developmental disabilities. Meydenbauer Yacht Club provides the ships and volunteers to join the parade along the Lake Washington Shoreline. Individuals interested in attending please register. Space is limited. Interested volunteers please contact Mary Boyle at 425-452-4118. Meet at Meydenbauer Yacht Club, 9927 Meydenbauer Way SE; Bellevue, WA 98004.

For more information contact Mary Boyle at 425-452-4118 or Mboyle@bellevuewa.gov

This information will be provided in alternate formats for individuals with disabilities upon request. We invite everyone's participation, please provide two weeks advance notice for accommodation requests. Assistance for the Deaf / Hard of hearing can be provided through the 711 Telecommunications Relay Service.

J rec highland Program descriptions

CHOICES FOR PEOPLE WITH DISABILITIES



CITY OF BELLEVUE
PARKS & COMMUNITY SERVICES
WWW.BELLEVUEWA.GOV



UPDATED 2008

Acknowledgements

Bellevue City Council

Grant Degginger, Mayor
John Chelminiak, Deputy Mayor
Claudia Balducci
Patsy Bonincontri
Don Davidson
Conrad Lee
Phil Noble

Parks & Community Services Board

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Working to help
support your
“CHOICES” in
Parks programs!



Cover Letter

Mission

It is the purpose of Bellevue’s Parks & Community Services to provide people who live with disabilities the opportunities and choices for recreation, socialization and learning so that they can participate more successfully in the life of our community.

Vision

People living with disabilities successfully participate in program(s) of their choosing throughout the Bellevue area.

Purpose of this Plan

The Choices for People with Disabilities Plan provides an outline of recreational choices available for residents with disabilities. The Plan describes the process that Parks & Community Services uses to support the inclusion process & specialized recreation, thereby encouraging those living with disabilities to participate in the programs of their choosing.

Service delivery of programs for individuals living with disabilities has been guided by Federal and State laws and service requirements such as the Americans with Disability Act of 1990 (ADA). The Choices plan was drafted after reviewing the needs of Bellevue citizens and researching inclusion plans from across the United States.

Development of the Choices Plan included a review of the City of Bellevue’s legal responsibilities regarding access and accommodations, discussions with program participants regarding acceptable modifications as well as the review of inclusion models across the nation. The Plan was developed by a team of department staff and has been reviewed by managers and the Parks & Community Services Board.



Introduction

The City of Bellevue Parks & Community Services provides a variety of programs, activities and services. We are committed to working with people with disabilities, their families and caregivers to help ensure that they have access to services. We provide information about program opportunities and when needed, modifications that make it possible for participants to access and participate in programs of their choice.



Recreation and socialization activities and programs provided by Bellevue Parks & Community Services promote healthy social, physical, educational and cultural development. Inclusion allows those with differing abilities the opportunity to participate in City of Bellevue recreational programs. Inclusion increases the number of recreational choices, allows for individual growth and development and for expanded social circles. Specialized recreation programs provide choice, support skill development and successful recreation participation for participants with disabilities.

History



The City of Bellevue began providing specialized recreation activities for individuals with disabilities in the early 1970's with evening programs for adults with developmental disabilities. In the 1980's the City expanded services at Highland Community Center and established the Center as a "specialized recreation" facility providing services to residents with disabilities.



During the 1990's the City broadened its program choices at Highland Center, expanded specialized recreation programs and activities to other City facilities and began to integrate specialized recreation participants into City recreation programs. During this time, participation in Highland Community Center programs increased significantly to include participants living outside of Bellevue. City staff worked to develop interlocal agreements with several neighboring Cities. These agreements have supported reduction of the City subsidy for Specialized Recreation programs.

Each year more and more individuals living with disabilities choose to participate in any program that the City of Bellevue offers. The City is committed to providing modifications for residents to support successful inclusion. This inclusion plan will help city staff when providing access and support to those living with disabilities.

Inclusion Plan

Purpose:

“The Inclusion Plan provides an internal process and strategies that support the successful participation and integration of individuals with disabilities into facilities, programs, activities and services provided through the Parks & Community Services.”

The Plan provides a strategy and process that encourages each program or service within the Department to support choices, opportunities and participation of residents with disabilities. It requires and involves the support of all the divisions within the Department, each of which has an important role in supporting the inclusion of people with disabilities into the community.

Inclusive experiences encourage and enhance opportunities for people of varying abilities to participate and interact in life’s activities together. It also provides an environment that promotes and fosters physical, social and psychological inclusion of people with diverse experiences and skill levels. Additionally, inclusion is effective in developing community support and encouraging attitudinal changes to reflect dignity, self-respect and involvement within the community.

“Our young people benefit from the joy of seeing persons with disabilities achieve their dreams as they become one with everyone on stage.”
(James McClain, Community Services, Bellevue Youth Theater)



Benefits of Inclusion

Inclusion Philosophy

- Provides the greatest choice of recreation activities and experiences.
- Supports full and active participation of individuals with disabilities in the same community activities as individuals without disabilities.
- Looks at the recreational needs and interests of individuals instead of the diagnostic labels (i.e., mental retardation, learning disability, physical disability, etc.)
- Provides individuals with modifications that will enhance the recreation experience.
- Integrates individuals into recreation activities of their choosing to enable the greatest amount of enjoyment and participation.
- Provides positive recreational experiences which contribute to the growth and development of every individual.
- Develops community support and encourages attitudinal changes to reflect the right of all people to dignity, self respect, and community involvement.

Benefits for Individuals with Disabilities in Inclusive Settings

- Individuals develop friends in communities in which they live fostering a sense of belonging for the individual and family.
- Individual is viewed as a person first.
- Focus shifts from what an individual cannot do to what she/he can do.
- Individual differences are respected and the individual with the disability is valued.
- Inclusion provides the individual and the family with choices within the community.

Benefits to Individuals without Disabilities in Inclusive Settings

- Individuals learn to respect differences.
- Individuals learn to value diversity.
- Individuals are better prepared to reach a comfort level with people who are different from themselves.
- Individuals learn to handle difference in stride.
- Individuals learn that everyone has strengths.
- Parents report positive values are learned by their children.
- Individuals are more likely to be given accurate information about disabilities as their questions are answered in a natural environment.

“As long as differences and diversities of mankind exist, democracy must allow for compromise, for accommodation, and for the recognition of differences.”
(Eugene McCarthy)



Specialized Recreation Programs



Specialized Recreation programs provide opportunity for individuals living with disabilities to recreate with those with similar abilities. This experience offers positive social, recreational, and skill development opportunities.

Therefore, while encouraging inclusion, the City of Bellevue will also continue to provide specialized recreation programs.

Benefits of Specialized Recreation Programs



- Build skills needed to transition to non-specialized programs.
- Allows for participation in programs and activities with instructors and staff that may be more knowledgeable about disabilities.
- Allows an individual to participate in an activity with others of similar ability.
- Provides an introductory choice for learning new recreation activities.
- Provides a safe environment for developing communication and social skills.
- Provides an option/choice requested by participants and/or their parents/ guardians.
- Encourages activity to those isolated in the community.



Goals

The following goals are intended to support the development and implementation of a Choices Plan that supports successful participation in City services and programs for individuals with disabilities.

Goal 1

Ensure that people with disabilities have access to City parks, facilities and programs.

- Develop and maintain accessible, barrier-free facilities, parks, and programs.
- Facilitate the growth of a continuum of recreation opportunities, programs and services for residents with disabilities.
- Make information available indicating accessible parks, programs and services.



Adaptive Equipment

Goal 2

Expand recreation “choice” opportunities.

- Ensure reasonable accommodations are provided that support inclusion at facilities and programs.
- Develop Inclusion Opportunities at other recreation sites.
- Provide information and referral to other providers.
- Develop skill-based programs.
- Expand locations of specialized recreation classes and programs.
- Provide training to other organizations.



Activity buddies

Goal 3

Improve Parks & Community Services Staff knowledge and awareness toward serving residents with disabilities.

- Improve staff qualifications and training opportunities regarding inclusion, therapeutic recreation, and knowledge of persons with disabilities.
- Develop a on-line “resource library” that provides information regarding disabilities organizations, programs and services in our community.
- Develop and implement training opportunities for all paid staff, volunteer staff, and contractors that focus on the following areas:
 - Disability Awareness
 - Barriers to Accessibility
 - Assessing participant needs/ providing Reasonable Accommodations
 - Benefits of Inclusion
 - Purpose of Specialized Recreation programs





Supporting Job Skills



Encouraging family activity

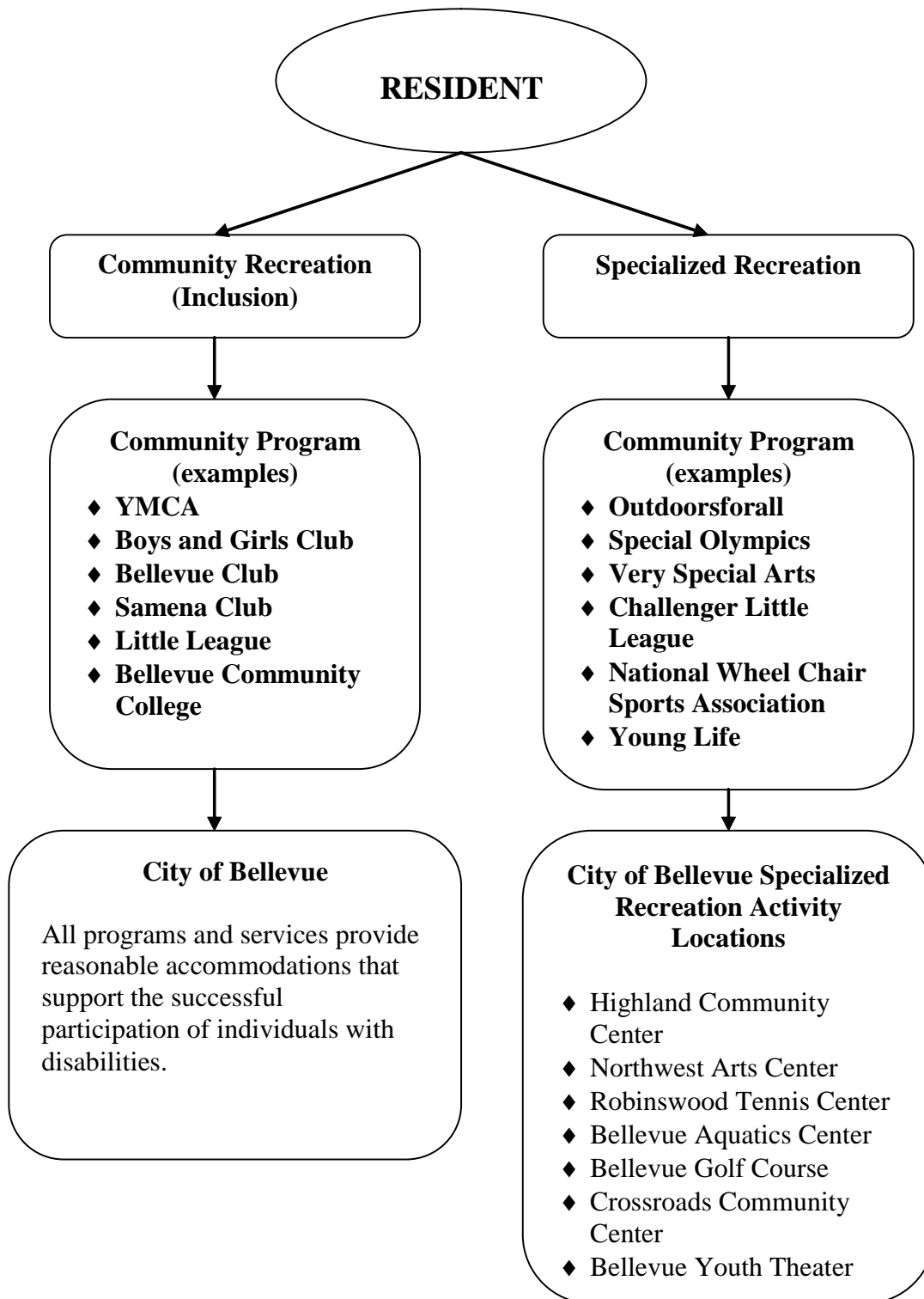


Goal 4

Develop and implement strategies that expand awareness and knowledge of program and service opportunities for residents with disabilities.

- Create a leisure education program that introduces and informs participants with disabilities of Department programs, classes, and services to include health and wellness, fitness and nutrition.
- Develop a marketing plan that connects with, informs and invites citizens with disabilities to participate in all City of Bellevue Parks & Community Services Department's services, facilities and programs.
- Establish and support current and future partnerships and collaborations with area agencies and organizations to ensure a continuum of programming for persons with disabilities.
- Develop and maintain website at Highland Community Center providing information resources concerning disabilities.

Recreation Choices for Bellevue Residents with Disabilities



INCLUSION PROCESS

“Rather than debating whether a particular child may slot into our school, we turn it around. We say, ‘This child wants to come to our school, so what can we do to meet their needs?’”

(Julie Butters, the head of learning support at Tring School in Hertfordshire, England)



The City of Bellevue welcomes the opportunity to provide accommodations to people with disabilities so that full participation in leisure and recreation programs, classes, services and facilities may be enjoyed by all. The City of Bellevue will provide reasonable modifications on a case-by-case, individualized basis including, but not limited to training of staff, added supervision, use of adaptive equipment, consultation with other professionals and taking other steps to ensure a safe and enjoyable leisure experience. No extra charge or program fee will be charged for needed companions.

Successful participation and modifications succeeds with the commitment of the staff and the participants (parent/guardians). Participants are asked to notify staff regarding reasonable modifications necessary for participation at least two full weeks prior to the start of the program. However, in some cases we may need more time to make a reasonable modification. The City of Bellevue wants to provide a safe and enjoyable environment and will strive to do this cooperatively with all participants.

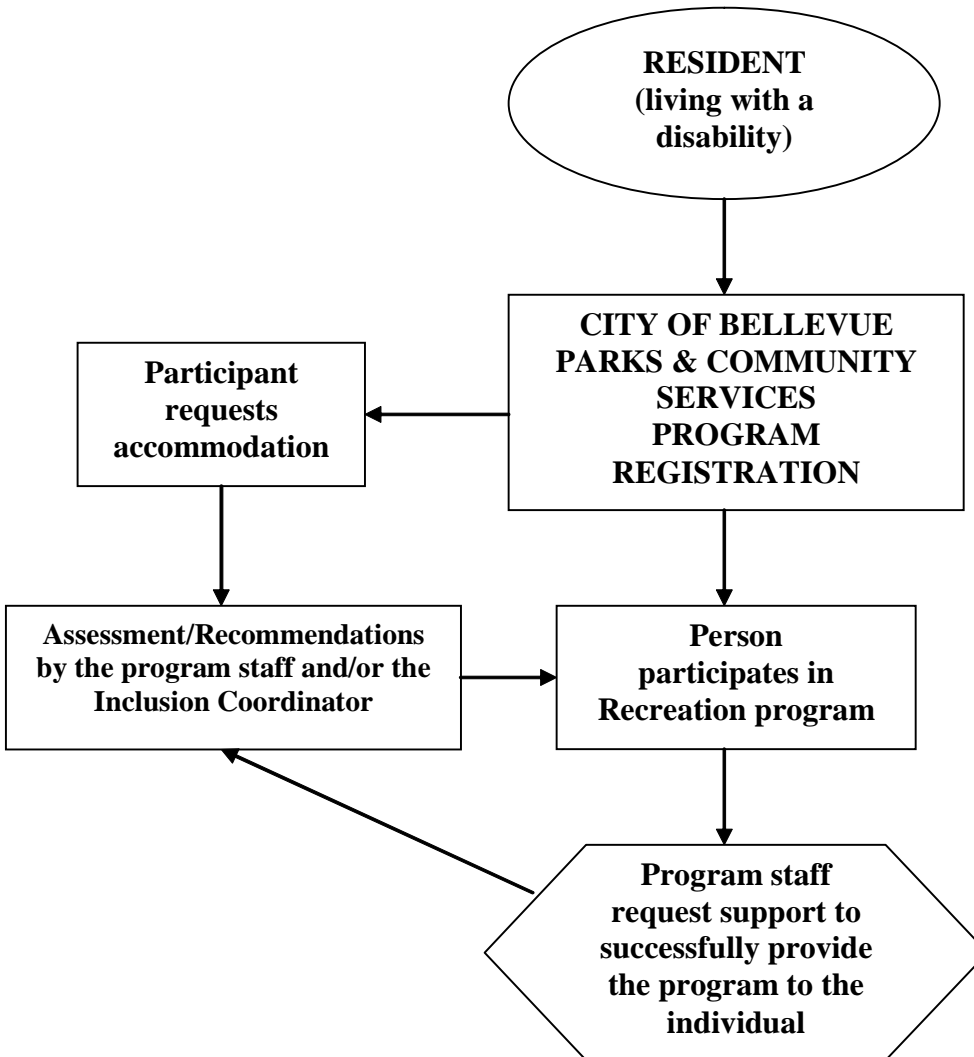
Individuals who have requested an accommodation will receive the City of Bellevue best efforts at providing adaptations and reasonable support in programs, activities and services. The City of Bellevue will continue to adapt ideas until all possibilities are exhausted. The City of Bellevue reserves the right to take any and all steps necessary, at any time, to ensure the safety and fundamental nature of its programs, classes, or activities.

Request for Accommodation Process

Initial Request Possibilities

- A person registers on his or her own, indicating through an accessibility request form that he or she needs to request an accommodation. The received form is reviewed by the Recreation Inclusion Coordinator. The Inclusion Coordinator informs the appropriate recreation site. The recreation site will work with the Inclusion Coordinator to provide the requested accommodation.

**INCLUSION
PROCESS FOR
CITY OF BELLEVUE
REGISTERED PROGRAMS**

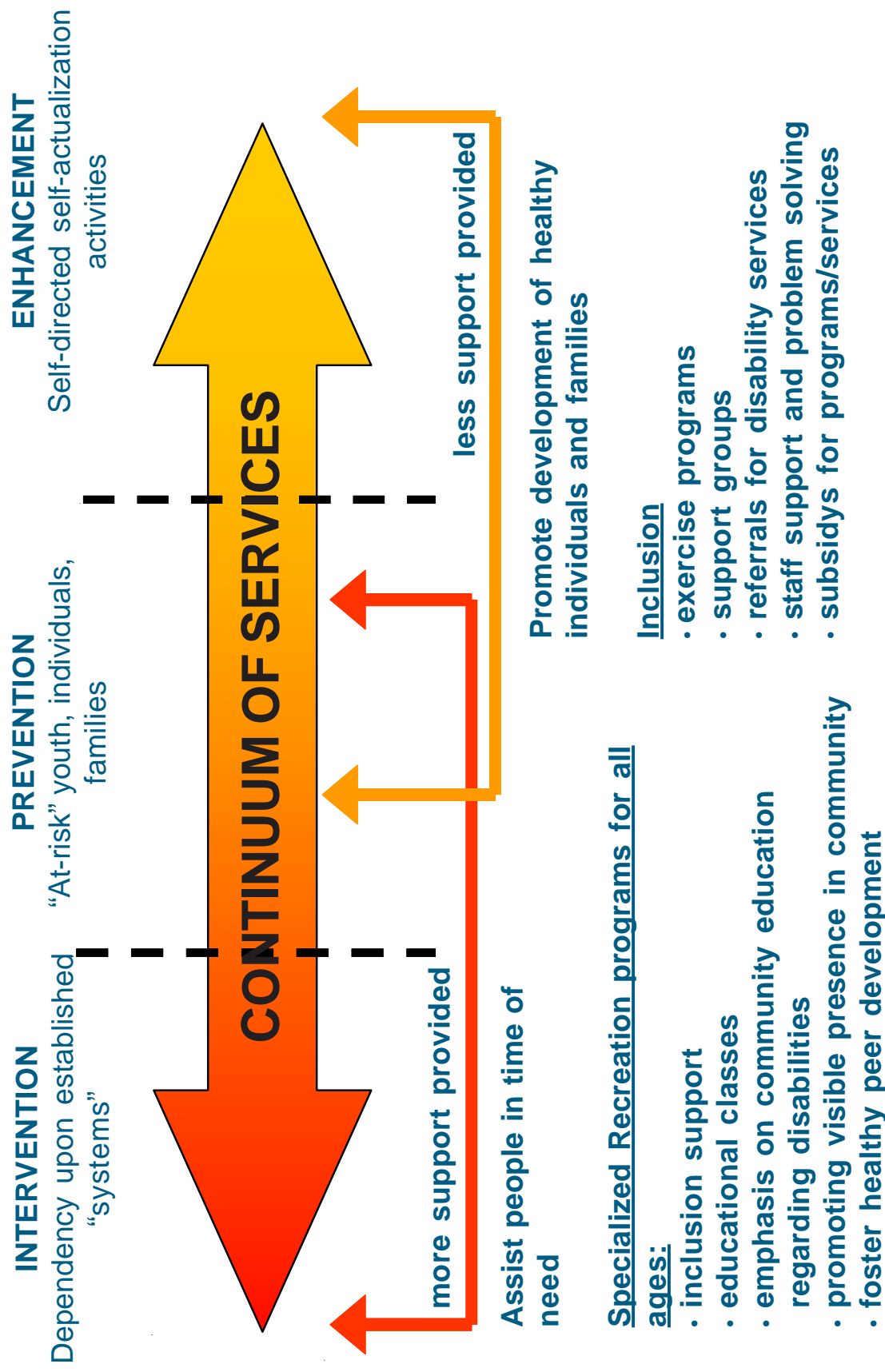


**ACCOMMODATION
EXAMPLES**

Parent Education
Integration Partner
Instructor/staff training
Program modifications
Communication
Equipment Adaptions
Mobility Assistance
Medication Assistance
Supervision
Modeling

ADDENDUMS

City of Bellevue - Parks & Community Services - Overall Vision



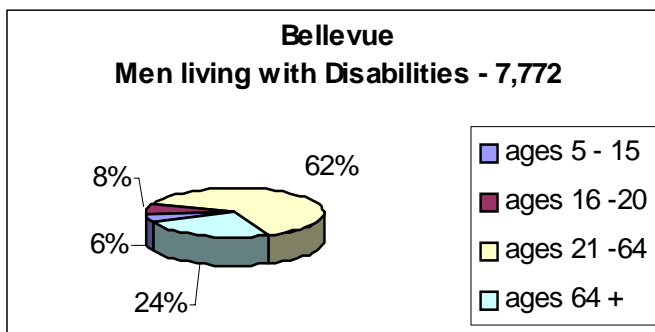
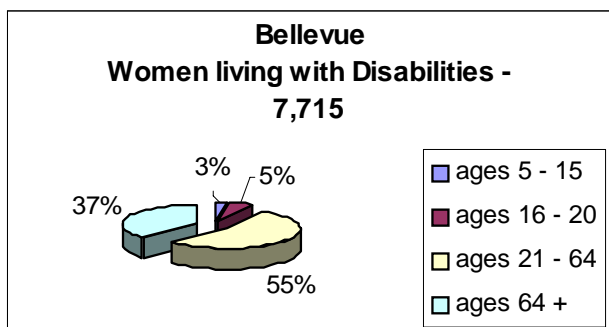
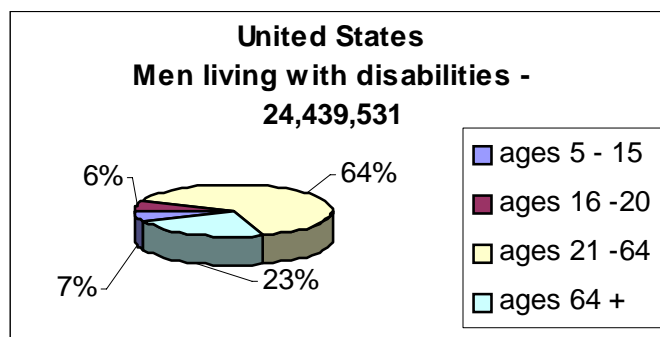
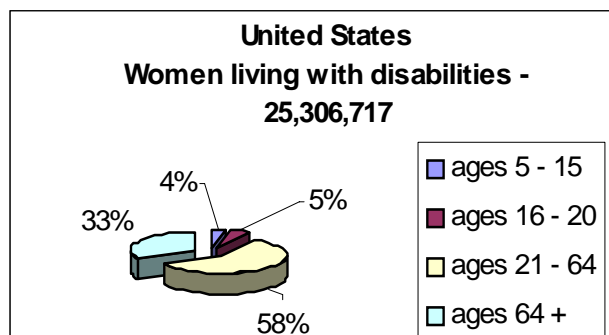
"The Choices Plan encourages people living with disabilities to participate in the least restrictive environment as possible while experiencing activities in our community. Therefore our goal is to always support the individuals at being as independent as possible."

Addendum #1

DISABILITY DEMOGRAPHICS

DEMOGRAPHICS

Comparison of males and females according to age living with disabilities in the United States versus those living in Bellevue.



These graphs represent all people who have identified themselves living with one or more disabilities. Types of disabilities could include physical such as sight, hearing, ambulation, and/or developmental such as learning disability, mental retardation, autism, etc.. Many people are able to find supports for their disability and are therefore able to independently participate in life. Some people living with disabilities require support extended from systems set up in our communities in order to simply live. Although the graphs do not indicate the amount of support required from the communities, they do indicate the presence of assistance needed for people living in our community. (www.census.gov/)

DEMOGRAPHICS

Disability type comparison of United States and City of Bellevue

		UNITED STATES					BELLEVUE				
		Total %					Total %				
		of pop.	Males	%	Females	%	of pop.	Males	%	Females	%
Pop. 5 yrs & over		100	124,636,825	100	132,530,702	100	100	50,843	100	51,833	100
all disabilities		19.3	24,439,531	20	25,306,717	19.1	15.1	7,772	15.3	7,715	14.9
Pop 5 - 15 yrs		100	23,125,324	100	22,008,343	100	100	7,467	100	6,904	100
all disabilities		5.8	1,666,230	7.2	948,689	4.3	4.5	438	5.9	203	2.9
	Sensory	1	242,706	1	200,188	0.9	0.4	43	0.6	20	0.3
	Physical	1	251,852	1.1	203,609	0.9	0.6	56	0.8	24	0.4
	Mental	4.6	1,387,393	6	691,109	3.1	3.7	382	5	154	2.2
	Self-Care	0.09	244,824	1.1	174,194	0.8	0.7	74	10	31	0.5
Pop. 16 - 64 yrs		100	87,570,583	100	91,116,651	100	100	37,265	100	36,745	100
all disabilities		18.6	17,139,019	20	16,014,192	17.6	13.5	5,430	14.6	4,592	12.5
	Sensory	2.3	2,388,121	2.7	1,735,781	1.9	13	565	1.5	374	1
	Physical	6.2	5,279,731	6	5,870,634	6.4	3.2	982	2.7	1,353	3.7
	Mental	3.8	3,434,631	3.9	3,329,808	3.7	2.5	1,026	2.8	833	2.3
	Self-Care	1.8	1,463,184	1.7	1,686,691	1.9	0.8	285	8	318	0.9
Pop 65 and over		100	13,940,918	100	19,405,708	100	100	6,111	100	8,184	100
all disabilities		41.9	5,634,282	40	8,343,836	43	33.7	1,904	31.2	2,920	35.7
	Sensory	14.2	2,177,216	16	2,561,263	13.2	11	678	11	844	10.3
	Physical	28.6	3,590,139	26	5,955,541	30.7	22	1,254	20.5	1,925	23.5
	Mental	10.8	1,380,060	9.9	2,212,852	11.4	9.6	526	8.6	851	10.4
	Self-Care	9.5	1,044,910	7.5	2,138,930	11	7.8	453	7.4	661	8.1

Disability Status:2000

Census 2000 Brief

By

Judith Waldrop

and

Sharon M.Stern

Census 2000 counted 49.7 million people with some type of long lasting condition or disability. They represented 19.3 percent of the 257.2 million people who were aged 5 and older in the civilian non-institutionalized population — or nearly one person in five. Within this population, Census 2000 found:

- 9.3 million (3.6 percent) with a sensory disability involving sight or hearing.
- 21.2 million (8.2percent) with a condition limiting basic physical activities, such as walking, climbing stairs, reaching, lifting or carrying.
- 12.4 million (4.8 percent) with a physical, mental, or emotional condition causing difficulty in learning, remembering, or concentrating.

- 6.8 million (2.6 percent) with a physical, mental, or emotional condition causing difficulty in dressing, bathing, or getting around inside the home.

- 18.2 million of those aged 16 and older with a condition that made it difficult to go outside the home to shop or visit a doctor (8.6 percent of the 212.0 million people this age).

21.3 million of those aged 16 to 64 with a condition that affected their ability to work at a job or business (11.9 percent of the 178.7 million people this age).

Census 2000 showed disability rising with age.

Disability rates rose with age for both sexes, but significant differences existed between men and women (see Disability Status: 2000, census 2000 brief www.census.gov, Figure 2). For people under 65 years old, the prevalence of disability among men and boys was higher than among women and girls. In contrast, disability rates were higher for women than men aged 65 and older.

Specifically, in 2000, the disability rate was 7.2 percent for boys 5 to 15 years old and 4.3 percent for girls the same age. Nearly two-thirds of all children with disabilities were boys. Census 2000 found 1.7 million boys this age with one or more disabilities, compared with 949,000 girls this age.

Among people aged 16 to 64 in the civilian non-institutionalized population, 19.6 percent of men and 17.6 percent of women reported one or more disabilities.

Among people 65 and older, the disability rate was 43.0 percent for women and 40.4 percent for men. In this age group, 59.7 percent of people with disabilities were women. However, 58.2 percent of all people aged 65 and older were women.

In the civilian non-institutionalized population, people 65 and older were much more likely than people of working age (16 to 64) to report a sensory, physical, mental, or self-care disability, or a disability causing difficulty going outside the home. While only 6.4 percent of working-age adults experienced difficulty going outside the home alone to shop or visit the doctor, 20.4 percent of older adults reported these problems. Physical disabilities affected 6.2 percent of the working-age population and 28.6 percent of older adults. About 3.8 percent of working-age adults reported difficulties in learning, remembering, or concentrating (a mental disability), compared with 10.8 percent of older adults. The prevalence of a self-care disability was more than 5 times greater among older adults (9.5 percent) than among people of working age (1.8 percent). Also, the occurrence of sensory disabilities was more than 6 times greater among older adults than working-age people, 14.2 percent compared with 2.3 percent.

U.S. Census Bureau

ABOUT CENSUS 2000

Why Census 2000 Asked

About Disability

Information on disability is used by a number of federal agencies to distribute funds and develop programs for people with disabilities and the elderly. Among these are the Carl D. Perkins Vocational and Applied Technology Training Act, the School Dropout Demonstration Assistance Act, and State Literacy Initiatives. Data about the number, distribution, and needs of people with disabilities are essential under the Rehabilitation Act, which guarantees benefits to qualified people with disabilities. Data about difficulties going outside the home and work disabilities are important to ensure comparable public transportation services for all segments of the population, according to the goals of the Americans With Disabilities Act. Disability data also includes veterans under the elderly people with physical and people with disabilities.

See www.census.gov, Census 2000 Brief for the complete report.

Addendum # 2

DISABILITY AWARENESS INFORMATION

Disability Awareness:

- Welcome to Holland (2a)
- Definition of Disability (2b)
- Disability Awareness Questionnaire (2c)
- Meeting a Person with a Disability (2d)

History/Laws/Rights of People with Disabilities

- History of Disability Movement (2e)
- Americans with Disability Act (2f)
- ADA Guidelines (2g)

Accessibility/Programming

- Reasonable Accommodations (2h)
- Barriers to Participation (2i)
- Dependence/Independence (2j)



The following story was written and has been used to share the realities and benefits that may result from being born “different” from others.

WELCOME TO HOLLAND

“When your going to have a baby, it’s like your planning a vacation to Italy. You’re all excited. You get a whole bunch of guidebooks, you learn a few phrases in Italian so you can get around, and then it comes time to pack your bags and head for the airport—for Italy.

Only when you land, the flight attendant say’s ‘Welcome to Holland’.

You look at one another in disbelief and shock, saying ‘Holland? What are you talking about? I signed up for Italy!’

But they explain there’s been a change in plans, and you’ve landed in Holland, and there you must stay. ‘But I don’t know anything about Holland! I don’t want to stay!’ you say.

But you do stay. You go out and buy some new guidebooks, you learn some new phrases and you meet people that you never new existed. The important thing is that you are not in a filthy, plague-infested slum full of pestilence and famine. You are simply in a different place than you had planned. It’s slower paced than Italy, less flashy than Italy, but after you’ve been there a little while and you have had a chance to catch your breath you begin to discover that Holland has windmills, Holland has tulips, Holland has Rembrandts.

But everyone you know is busy coming and going from Italy. They’re all bragging about what a great time they had there and for the rest of your life, you will say, ‘Yes, that’s what I had planned.’

The pain of that will never, ever go away.

You have to accept that pain, because the loss of that dream, the loss of that plan, is a very significant loss. But if you spend your life mourning the fact that you didn’t get to Italy, you will never be free to enjoy the very special, the very lovely things about Holland.”

- By Carol Turkington

DEFINITION OF DISABILITY

WASHINGTON STATE:

WAC 162-26-050 What is a Handicap. (2) Statute.RCW 49.60.215 A person's condition is a "sensory, mental, or physical handicap" if it is abnormal and is a reason why the person was not fairly served in a place of public accommodation. A person is handicapped by a sensory, mental, or physical condition if she or he is not fairly served because of the condition. The law protects all persons from unfair service because of handicap, whether the handicap is severe or slight.

(3) When handicap is present. The presence of a sensory, mental, or physical handicap includes, but is not limited to, circumstances where a sensory, mental, or physical condition:

- (a) Is medically cognizable or diagnosable
- (b) Exists as a record or history; or
- (c) Is perceived to exist, whether or not it exists in fact.

DEFINITION OF DISABILITY

AMERICAN'S WITH DISABILITIES ACT:

36.104 Definitions.

Disability means, with respect to an individual, a physical or mental impairment that substantially limits one or more of the major life activities of such individual; a record of such an impairment, or being regarded as having such an impairment.

DISABILITY AWARENESS QUESTIONNAIRE

- | | | | |
|---|---|-----|---|
| T | F | 1. | When a child sees an adult with a disability and asks a personal question - (Why are you in a wheelchair? Why can't you move your legs?) should the child be pulled away? |
| T | F | 2. | Never ask a blind person to go to a movie, a deaf person to go to a concert, or a person in a wheelchair to go swimming or boating. |
| T | F | 3. | If it appears that a person with a disability needs some assistance, simply say, " may I be of assistance?" |
| T | F | 4. | When verbal communication with a person who is deaf or hard of hearing proves unsuccessful, write your message down. |
| T | F | 5. | When a person is having a seizure, one should not try to restrain the persons arms and legs. |
| T | F | 6. | One should avoid using words like " look and see" around a person who is blind and never say, " lets take a walk" to a person in a wheelchair. |
| T | F | 7. | People with disabilities will readily use accessible facilities provided for them. |
| T | F | 8. | When talking in a group and a person who is blind using a cane approaches, everyone in the group should be very quiet. |
| T | F | 9. | A Service Animal should never be talked to, petted or fed by anyone unless given permission by its master. |
| T | F | 10. | When a deaf person approaches with an interpreter, only speak to the interpreter. |
| T | F | 11. | Humorous situations that arise as a result of a disability should be ignored. |
| T | F | 12. | When conducting a job interview, discuss a person's disability openly and freely. If you have questions ask them immediately. |
| T | F | 13. | A job is often a primary source of social contact for people with disabilities. |
| T | F | 14. | Any job is better than no job, therefore, hire a person with a disability in any available position. |

1)T 2)F 3)T 4)T 5)T 6)F 7)T
8)F 9)T 10)F 11)F 12)F 13)T 14)F

MEETING A PERSON WITH A DISABILITY

- **DO** accept the fact that a disability exists. Not acknowledging a disability is like ignoring someone's sex or height. But to ask personal questions regarding the disability might be inappropriate until a closer relationship develops in which personal questions are more naturally asked.
- **DON'T** be sensitive about using words like "walking", "seeing", "running". Persons with disabilities use the same words.
- **DO** talk to the person with a disability, not to someone accompanying them.
- **DO** treat a person with a disability as a healthy person. Because a individual has a functional limitation does not mean the individual is sick. Some disabilities have no accompanying health problems.
- **DON'T** assume that a lack of response indicates rudeness. In some cases a person with a disability may seem to react to situations in an unconventional manner or may appear to ignore you. Consider that the individual may be deaf or hard of hearing or other disability which may affect social or motor skills.
- **DO** offer to help, but wait until your offer is accepted before doing anything (e.g., reading the menu, explaining directions).
- **DO** remember that people with disabilities have the same activities of daily living that you do. They are involved in work, recreation, personal relationships, and social activities.
- **DO** keep your concepts clear and concise when talking to people with a cognitive disability. Use fewer complete sentences. Don't talk down to a person with a disability. The quality of your conversation won't change by making your points clear and easy to understand.
- **DON'T** automatically touch a person's wheelchair. It is a part of their personal space.
- **DO** consider sitting down to speak at eye level when a conversation with a wheelchair user proceeds more than a few minutes.

A Brief History of the Disability Movement

➤ **1948 Accessible Housing Bill**

According to the U.S. Census, there are more than 54 million people with disabilities in the United States. Historically, the condition of having a disability has been viewed as tragic. Through ignorance and fear, people with disabilities were typically labeled beggars or indigents. The word “handicap” itself is said to derive from “cap in hand,” an activity familiarly associated with panhandling.

➤ **1968 Architectural Barriers Act** - equal access in public buildings

By the 19th century, it was common for people with disabilities to be institutionalized, and they were looked upon as patients or clients who needed curing. This practice had the effect of excluding people with disabilities from the larger society and implied that something was inherently and permanently wrong with them. It provided no room for integration, and perpetuated myths of inequality.

➤ **1973 Rehabilitation Act** - Prohibits employment discrimination against individuals with disabilities in the federal sectors.

In the first half of the twentieth century, as thousands of WWI soldiers returned home, the first vocational rehabilitation acts were passed in the 1920s to provide services to WWI veterans with newly acquired disabilities. But perhaps the biggest changes within the disability rights movement came with the civil rights movements of the 1960s. As African Americans, women and other social minorities gained political consciousness, so did people with disabilities.

➤ **1990 Americans with Disabilities Act** - Protects the basic civil rights of Americans with disabilities

In the early 1970s, people with disabilities lobbied Congress to put civil rights language for people with disabilities into the 1972 Rehabilitation Act. The Act was vetoed by President Nixon. After a group of people with disabilities marched on Washington, a revised 1973 Rehabilitation Act was passed. For the first time in history, the civil rights of people with disabilities were protected by law.

➤ **2004 Individuals to Disabilities Education Act (IDEA)** - ensuring public education for kids age 3-21 living with disabilities

Parallel to the disability rights movement was a movement in the 1970s to provide access to educational services for children and youth with disabilities. The Education for All Handicapped Children Act (P.L.-94-142) was passed in 1975 to ensure equal access to public education for students with disabilities. The Act, renamed the Individuals with Disabilities Education Act (IDEA) in 1990, called for a free and appropriate public education for every child with a disability, to be delivered in the least restrictive environment. IDEA promotes the concept of inclusion, requiring that students with disabilities be educated in general education settings alongside students without disabilities to the maximum extent appropriate.

Despite changes in rehabilitation and education law, people with disabilities did not achieve broad civil rights until the enactment of the Americans with Disabilities Act (ADA) in 1990. This landmark federal anti-discrimination law ensures equal access to employment opportunities and public accommodations for people with disabilities. With this act, Congress identified the full participation, inclusion and integration of people with disabilities into society as a national goal.

AMERICANS WITH DISABILITIES ACT

State and Local Governments:(Guidelines)

Program Access:

- Must ensure that individuals with disabilities are not excluded from services, programs and activities because buildings are inaccessible.
- Need not remove physical barriers, such as stairs, in all existing buildings, as long as they make their programs accessible to individuals who are unable to use an inaccessible existing facility.
- Can provide services, programs, and activities offered in the facility to individuals with disabilities through alternative methods, if physical barriers are not removed.
- May not carry an individual with a disability as a method of providing access, except in “manifestly exceptional” circumstances.
- Are not required to take any action that would result in a fundamental alteration in the nature of the service, program or activity or in undue administrative and financial burdens. However, public entities must take any other action, if available, that would not result in a fundamental alteration or undue burdens but would ensure that individuals with disabilities receive the benefits or services.

Integrated Programs:

- Integration of individuals with disabilities into the mainstream of society is fundamental to the purposes of the Americans with Disabilities Act.
- Public Entities may not provide services or benefits to individuals with disabilities through programs that are separate or different, unless the separate programs are necessary to ensure that the benefits and services are equally effective.
- Even when separate programs are permitted, an individual with a disability still has the right to choose to participate in the regular program.
- State/local governments may not require an individual with a disability to accept a special accommodation or benefit if the individual chooses not to accept it.

Americans with Disabilities Act

The Americans with Disabilities Act (ADA) was passed to address and eliminate the major forms of discrimination faced daily by people with disabilities, and represents the most important civil rights legislation passed since the 1964 Civil Rights Act.

How is disability defined by law? In order to receive the protections of the ADA, a person must satisfy at least one of three conditions:

- Have a physical or mental impairment that substantially limits one or more major life activities, such as hearing, seeing, walking, breathing or speaking;
- Have a record of a substantially limiting impairment to a major life activity, such as a person who has recovered from cancer or an individual previously categorized as having a learning disability; or
- Be misperceived as having a substantially limiting impairment, which in reality is not substantial, such as controlled high blood pressure; or does not cause any substantial limitations, such as a facial scar or physical disfigurement.

EMPLOYMENT

The employment provisions of the ADA prohibit discrimination in all job-related practices and activities. The ADA requires that all employment decisions be made without reference to the existence or consequence of disability.

Employers are required to provide “reasonable accommodations” for workers with disabilities when such accommodations would not impose any “undue hardship” such as significant difficulty or expense to the overall business operation. The term “reasonable accommodation” may include such things as:

- Making the workspace physically accessible
- Acquisition or modification of equipment or devices
- Job restructuring, or modified work schedules
- Appropriate adjustment or modifications of training materials or policies
- Provision of qualified readers or interpreters

If an individual does not request an accommodation, an employer is not obligated to provide one.

ARCHITECTURAL AND COMMUNICATION BARRIERS

Inaccessibility affects the entire community, not only people with disabilities, but also other populations, such as pregnant women and elderly people. Title III of the ADA specifies that discrimination includes a failure to remove architectural or communication



barriers in existing facilities if such removal is readily achievable (i.e., accomplishable without much difficulty or expense). Examples include adjustments such as adding grab bars in restrooms, lowering public telephones or adding Braille markings on elevator control buttons.

DISCRIMINATION AND OTHER BARRIERS

An attitudinal barrier is defined as a way of thinking or feeling that results in behavior that limits the potential of people with disabilities to function independently. The vast majority of the American public is neither positive nor negative toward people with disabilities. Most people just prefer not to think about disability at all. In order to overcome these attitudinal barriers, it is important that people educate themselves about the facts of disability and participate in community programs that include all people.

SUGGESTIONS TO IMPROVE ACCESS AND POSITIVE INTERACTIONS

- Offer assistance if asked, but do not insist.
- Focus on the abilities of every person, rather than on their disabilities.
- Be aware of limitations specific to a disability, but do not be overprotective.
- Make sure that parking areas, restrooms, and buildings in which you provide services or conduct meetings are architecturally and environmentally accessible to all people.
- Remember that accessibility to the full range of services you provide is legally required.
- Conduct outreach efforts to publicize your programs to people with disabilities.
- Ask a person with a disability to facilitate disability awareness training sessions with your staff to promote positive attitudes.
- Involve people with disabilities on advisory boards, planning committees, in positions of authority, and in the planning and presentation of programs.
- Assume responsibility for understanding the issues that affect people with disabilities.

REASONABLE ACCOMMODATION

Definition: (from American's with Disabilities Act)

For Public Accommodation/Accessibility:

“Reasonable Accommodation is action, reasonably possible in the circumstances, to make the regular services of a place of public accommodation accessible to person who otherwise could not use or fully enjoy the services because of the person’s sensory, mental or physical limitations.”

Whether a possible accommodation is reasonable or not depends on the cost of making the accommodation, the size of the place of the public accommodation, the availability of the staff to make the accommodation, the importance of the service to the person with a disability and other factors bearing reasonableness in the particular situation.

For Employment:

- Modifications or adjustments to a job application process that enable a qualified applicant with a disability to be considered for the position such qualified applicant desires; or
- Modifications or adjustments to the work environment, or to the manner or circumstances under which the position held or desired is customarily performed, that enable a qualified individual with a disability to perform the essential functions of that position; or
- Modifications or adjustments that enable a covered entity’s employee with a disability to enjoy equal benefits and privileges of employment as are enjoyed by its other similarly situated employees without disabilities.

BARRIERS TO PARTICIPATION

Professionals assisting in the effort to improve lives by removing barriers need to recognize and attempt to eliminate the impact these barriers have upon individuals with disabilities.

It is the responsibility of the individual and the organization to make sure that a person's failure to participate is based as much as possible on personal choice. A decision not to participate should not result from barriers that systematically deny participation to specific groups of people.

Types of Barriers:

Intrinsic:

Permanent or temporary limitations that lie within the individual and may block fulfillment of needs desires and interests.

- Lack of Knowledge
- Social ineffectiveness
- Health Problems
- Physical and psychological dependency
- Skill/challenge gaps

Environmental Barriers:

External forces that block actions a person takes toward involvement in recreation programs. Imposed on the individual by societal or ecological conditions.

- Attitudinal barriers.
- Architectural barriers
- Ecological barriers
- Transportation barriers
- Economic barriers
- Rules and regulation barriers
- Barriers of omission

Communication Barriers:

Breakdown in message between the sender and the receiver.

- Expressive block
- Receptive block

ADDENDUM #3

Types of Disabilities

The purpose of the following pages is to provide the reader with basic information concerning disabilities. The number of different types of disabilities is too numerous to cover. This list is a place to start, covering some of the more common disabilities and terms we hear everyday but might not know what they mean. While it is helpful to have a rudimentary knowledge of these terms, the most important points are the relationships that we will have with people who are living with disabilities and their relationships with us.

Asperger Syndrome- is a neurobiological disorder named for a Viennese physician, Hans Asperger, who in 1944 published a paper which described a pattern of behaviors in several young boys who had normal intelligence and language development, but who also exhibited autistic-like behaviors and marked deficiencies in social and communication skills. It wasn't until 1994 that Asperger Syndrome was added to the list of recognized disabilities.

By definition, those with Asperger's Syndrome have a normal IQ and many individuals (although not all), exhibit exceptional skill or talent in a specific area. Because of their high degree of functionality and their naiveté, those with AS are often viewed as eccentric or odd and can easily become victims of teasing. Their vocabularies may be extraordinarily rich and some children sound like "little professors". However, persons with AS can be extremely literal and have difficulty using language in a social content.

Attention-Deficit/Hyperactivity Disorder (AD/HD) – is characterized by developmentally inappropriate impulsivity, attention, and in some cases, hyperactivity. AD/HD is a neurobiological disability that affects three-to-five percent of school-age children and approximately two-to-four percent of adults. Although individuals with AD/HD can be very successful in life, without identification and proper treatment AD/HD can have serious consequences, including school failure, depression, conduct disorder, failed relationships, and substance abuse. Early identification and treatment increase the likelihood of positive long-term outcomes.

AD/HD systems arise in early childhood, unless associated with some type of brain injury later in life. It is marked by behaviors that are long lasting and evident for at least six months with the onset before age seven. There are three primary subtypes:

AD/HD primary inattentive type: (AD/HD-I)

- Fails to give close attention to details or makes careless mistakes
- Has difficulty sustaining attention.
- Does not appear to listen.
- Struggles to follow through on instructions.
- Has difficulty with organization.
- Avoids or dislikes tasks requiring sustained mental effort.
- Is easily distracted.
- Is forgetful in daily activities.

AD/HD primary hyperactive/impulse type: (AD/HD-HI)

- Fidgets with hands or feet or squirms in chair
- Has difficulty remaining seated.
- Runs about or climbs excessively.
- Difficulty engaging in activities quietly.
- Acts as if driven by a motor.
- Talks excessively.
- Blurts out answers before questions have been completed.
- Difficulty waiting or taking turns.
- Interrupts or intrudes upon others.

AD/HD combined type: (AD/HD-C)

- Individual meets both sets of attention and hyperactive / impulsive criteria.

Autism and Pervasive Developmental Disorder- NOS (not otherwise specified)-

are developmental disabilities that share many of the same characteristics. Usually evident by age three, autism and PDD-NOS are neurological disorders that affect a child's ability to communicate, understand language, play and relate to others.

A diagnosis of autistic disorder is made when an individual displays 6 or more of 12 symptoms listed across three major areas; social interaction, communication, and behavior. When children display similar behaviors but do not meet the criteria for autistic disorder, they may receive a diagnosis of Pervasive Developmental Disorder-NOS (not other wise specified)

Some or all of the following characteristics may be observed in mild to severe forms:

- Communication Problems
- Difficulty in relating to people, objects, and events
- Unusual play with toys and other objects
- Difficulty with changes in routine or familiar surroundings
- Repetitive body movements or behavior patterns

Children with autism or PDD vary widely in abilities, intelligence, and behaviors. Some children do not speak; others have limited

language that often includes repeated phrases or conversation. People with more advanced language skills tend to use a small range of topics and have difficulty with abstract concepts. Repetitive play skills, a limited range of interests, and impaired social skills are generally evident as well. Unusual responses to sensory information, for example, loud noises, lights, certain textures of food or fabrics are also common.

Cerebral Palsy- a condition caused by injury to the parts of the brain that control our ability to use our muscles and bodies. Cerebral means having to do with the brain and palsy means weakness or problems with using the muscles. Often the injury happens before birth, sometimes during delivery, or soon after being born. CP can be mild, moderate, or severe. Mild CP may mean a child is clumsy. Moderate CP may mean the child walks with a limp. He or she may need a special leg brace or a cane. More severe CP can affect all parts of a child's physical abilities. A child with moderate or severe CP may have to use a wheelchair and other special equipment. Sometimes children with CP can also have learning problems, problems with hearing or seeing, or mental retardation. Usually, the greater the injury to the brain, the more severe the CP. However, CP doesn't get worse over time, and most children with CP have a normal life span.

Deaf and Hard of Hearing- are general terms used to describe all types of hearing defects, ranging from a very minimal loss to complete deafness. Deafness may be present at birth or the result of an accident, illness or prolonged exposure to excessive levels of noise. Whatever the cause, the presence of a hearing impairment implies a breakdown in the physical mechanism of hearing.

Deafness refers to a hearing loss so severe that, with or without an assistive hearing device, a person cannot always depend upon hearing to communicate with others. Anyone who becomes deaf after the age of seven usually has ordinary language and vocabulary skills. On the other hand, those who become deaf at an earlier age may have a more restricted command of language and vocabulary which may cause some difficulty with communication. The term "hard of hearing" refers to a condition where the sense of hearing is defective but functional for ordinary life purposes (sometimes with the help of a hearing aid).

Deafness and/or hard-of-hearing are classified as mild, moderate, or severe, based on the degree of hearing loss as measured in decibels. A decibel is a unit used to measure the loudness of sounds; it is based on the smallest change that an acute human

ear can hear. A sound of zero decibels is the softest sound. Ordinary conversation is measured at 60-8- decibels.

Developmental Disability - is a disability that is manifested before a person reaches the age of 22 and which is caused by mental retardation or related conditions which include cerebral palsy, epilepsy, autism or other neurological conditions which result in the impairment of general intellectual functioning or adaptive behavior similar to that of a person with mental retardation.

Down syndrome- is the most common and readily identifiable chromosomal condition associated with mental retardation. It is caused by a chromosomal abnormality: for some unexplained reason, as accident in cell development results in 47 instead of the usual 46 chromosomes. This extra chromosome changes the orderly development of the body and brain. In most cases, the diagnosis of Down syndrome is made according to results from a chromosome test administered shortly after birth.

Approximately 4,000 children with Down syndrome are born in the U.S. each year, or about 1 in every 800 to 1,000 live births. Although parents of any age may have a child with Down syndrome, the incidence is higher for women over 35. Most common forms of the syndrome do not usually occur more than once in a family.

There are over 50 clinical signs of Down syndrome, but it is rare to find all or even most of them in one person. Some common characteristics include:

- Poor muscle tone
- Slanting eyes with fold of skin at the inner corners(called epicanthal folds)
- Hyper flexibility (excessive ability to extend the joints)
- Short, broad hands with a single crease across the palm on one or both hands.
- Broad feet with short toes
- Flat bridge of the nose
- Short, low-set ears
- Short neck
- Small head

Besides having a distinct physical appearance, children with Down syndrome frequently have specific health-related problems. A lowered resistance to infection makes these children more prone to respiratory problems. Visual problems such as crossed eyes and far-or nearsightedness are higher in individuals with

Down syndrome, as are mild to moderate hearing loss and speech difficulty.

Epilepsy – is a physical condition that occurs when there is a sudden, brief change in how the brain works. When brain cells are not working properly, a person's consciousness, movement or actions may be altered for a short time. These physical changes are called epileptic seizures. Epilepsy is therefore sometimes called a seizure disorder.

About two million Americans have epilepsy; of the 125,000 new cases that develop each year, up to 50% are in children and adolescents.

Characteristics include:

- “Blackouts” or periods of confused memory
- Episodes of staring or unexplained periods of unresponsiveness.
- Involuntary movement of arms and legs
- “Fainting spells: with incontinence or followed by excessive fatigue
- Odd sounds distorted perceptions, episodic feeling of fear that cannot be explained

Head Injuries – is a traumatic event to the brain causing physical, cognitive and emotional impairment. Depending on the location of the injury on the head the characteristics will vary dramatically and may include the following: various sensory impairments; lack of coordination; paralysis to one or both sides of the body; seizures; short or long term memory loss; slowed thinking; impaired perception; communication difficulties; mood swings or other emotional impairments.

Learning disabilities – is a “disorder in one or more of the basic psychological processes involved in understanding or using language, spoken or written, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell or do mathematical calculations”. (Public Law 94-142, the Education for all Handicapped Children Act)

The definition further states that LD includes perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. According to the law, LD does not include learning problems that are primarily the result of visual, hearing, or motor handicaps: mental retardation, or environmental, cultural, or economic disadvantage.

Also required is a severe discrepancy between the child's potential (As measured by IQ) and his or her current status (as measured by achievement tests).

Major types of LD may be broken into disorders in four areas:

- Spoken language: Delays, disorders, and deviations in listening and speaking.
- Written language: Difficulties with reading, writing and spelling.
- Arithmetic: Difficulty in performing arithmetic functions or in comprehending basic concepts.
- Reasoning: Difficulty in organizing and integrating thoughts.

Mental Retardation – is a term used when a person has certain limitations in mental functioning and in skills such as communicating, taking care of him or herself, and social skill. These limitations will cause a child to learn and develop more slowly than a typical child.

Children with mental retardation may take longer to learn to speak, walk, and take care of their personal needs such as dressing or eating. They are likely to have trouble learning in school. They will learn, but it will take them longer. There may be some things they cannot learn.

Causes of Mental Retardation

- Genetic Conditions
- Problem during Pregnancy
- Problems at birth
- Health problems

Mental retardation is diagnosed by looking at two main things. These are:

- The ability of a person's brain to learn, think, solve problems, and make sense of the world (called IQ or intellectual functioning): and
- Whether the person has the skills he or she needs to live independently (called adaptive behavior, or adaptive functioning)

Intellectual functioning or IQ is usually measured by a test called an IQ test. The average score is 100. People scoring below 70 – 75 are thought to have mental retardation. To measure adaptive behavior, professionals look at what a child can do in comparison to other children of his or her age. Certain skills are important to adaptive behavior. These are:

- Daily living skills, such as getting dressed, going to the bathroom, and feeding one's self

- Communication skills, such as understanding what is said and being able to answer
- Social skills with peers, family members, adults, and others.

Multiple Sclerosis – is a progressive disease of the central nervous system in which scattered patches of myelin (the protective covering of nerve fibers) in the brain and spinal cord are destroyed. This causes symptoms ranging from numbness and tingling to paralysis and incontinence. The severity of multiple sclerosis varies markedly among sufferers.

The cause of multiple sclerosis remains unknown. It is thought to be an autoimmune disease in which the body's defense system begins to treat the myelin in the central nervous system as foreign, gradually destroying it, with subsequent scarring and damage to some of the underlying nerve fibers.

Characteristics vary depending on the location of the lesions. They may include: intolerance to heat; spastic paralysis; numbness in arms or legs; visual disturbances (double or blurred vision); loss of coordination or balance; or difficulty with speech; or difficulty with grasping items. In later stages, intellectual or emotional impairment, and seizures or confusion may occur.

Muscular Dystrophy – an inherited muscle disorder of unknown cause in which there is slow but progressive degeneration of muscle fibers. Different forms are classified according to the age at which the disease progresses and the way in which it was inherited. All forms of muscular dystrophy are rare. Duchenne muscular dystrophy is the most common type, affecting about one or two in 10,000 boys. It is inherited through a recessive, sex-linked gene so that only males are affected and only females can pass on the disease. By age 12 affected children are no longer able to walk with few surviving their teen years.

Spina Bifida – is a physical disability in which part of one (or more) vertebrae fails to develop completely, leaving a portion of the spinal cord exposed. One is born with this condition. Spina bifida can occur anywhere on the spine but is most common in the lower back. The severity of the condition depends on how much nerve tissue is exposed.

The cause of spina bifida remains unknown; it is thought that many factors are involved. The incidence is about one case per 1,000 babies born. The incidence increases with either very young or old maternal age. A woman who has had one affected child is ten times more likely than the average of having another affected child.

There are four types of spinal Bifida:

- Spina bifida occulta – the least serious form where there is little external evidence of the defect and can go completely unnoticed in otherwise healthy children, although occasionally there are accompanying abnormalities of the lower part of the spinal cord.
- Myelocoele – the most severe form where the child is severely handicapped. The legs are partially or completely paralyzed, with loss of sensation in all areas below the level of the defect. Hip dislocation and other leg deformities are common. Hydrocephalus (excess cerebrospinal fluid within the skull) is common and may result in brain damage.
- Meningocele – this form is less severe than myelocoele. The nerve tissue of the spinal cord is usually intact and there is skin over the bulging sac and there are therefore usually no functional problems. However, repairs are necessary early in life.
- Encephalocele – a rare form of spina bifida in which the protrusion occurs through the skull. There is usually severe brain damage.

Spinal Cord Injuries – A severe injury to the spinal cord may cause the loss of sensation to part of the body, or partial to complete paralysis. The loss of function in the lower part of the body is known as paraplegia. The loss of function to both upper and lower parts of the body is known as quadriplegia. A person with a spinal cord injury may walk independently, use crutches, canes, leg braces, or a wheelchair for mobility. Most spinal cord injuries are caused by accidents. The brain is not affected.

Stroke – damage to part of the brain caused by interruption to its blood supply or leakage of blood outside of vessel walls may cause physical disabilities. Sensation, movement, or function controlled by the damaged area is impaired. Impairments may include: weakness, loss of feeling; paralysis to one side of the body; difficulty with vision; inability to walk; inability to speak or make sense of language; or difficulty understanding the written word. Intelligence is not affected.

Visual Impairment – is used to describe permanent reduction in sight. The degree of severity is varied, ranging from “partially sighted” (20/70 visual acuity in the better eye) to “legally blind” (20/200 central visual acuity in the better eye with corrective lenses). “Blindness” is generally used for complete loss of sight.

RESOURCES

The American Medical Association. *Home Medical Encyclopedia*. New York, NY: Random House.

National Dissemination Center for Children with Disabilities.
(2003). *Disability Fact Sheets*. Washington, DC (800.695.0285.
Web: www.nichcy.org)

ADDENDUM #4 RESOURCE GUIDE

AGENCIES

ALS Association – Evergreen Chapter

6627 S 191st PL, Suite F-106 Kent, WA 98032

425.656.1650

www.alsa-ec.org

Chapter of national organization offers support groups and loans durable medical equipment and specialized communication devices, including laptop computers outfitted for communication needs.

ARC of King County

10550 Lake City Way, Suite A, Seattle, WA 98125

206.364.8384, TDD 206.364.7438

www.arcofkingcounty.org

Assists individual who are living with disabilities and their families through advocacy, referrals, support, and crisis intervention.

Arthritis Foundation

www.arthritis.org

AtWork

490 Juniper, Issaquah, WA 98027

425.274.4000, TDD 425.274.4000

www.atwork-issaquah.com

Provides employment training and placement services.

Autism Society of Washington

www.autismsocietyofwa.org

Birth to Three Developmental Center

35535 6th PL SW, federal Way, WA 98023

253.874.5445

www.birthtothree.org

Provides early intervention services and physical, occupational, speech/language, and oral motor/feeding therapies.

Brain Injury Association of Washington

16315 NE 87th, suite B-4, Redmond, WA 98052

425.895.0047, 800.523.5438 (continued on next page)

www.biawa.org

Provides information and resources regarding brain injuries, their families, and professionals who support them.

Bridge Ministries

520 6th ST.S Kirkland, WA 98033

425.828.1431

www.bridgemin.org

Provides many services to people with physical or developmental disabilities and their families.

Camp Fire USA – Central Puget Sound Council

16315 NE 87th St, Suite B-2, Redmond, WA 98052

425.885.0477, 800.451.2267

www.campfire-usa.org

Offers Saturday recreation for children with disabilities, ages 2-12, and their siblings. Camp experiences are also offered.

Catholic Community Service

877.531.1250

www.ccsww.org

Crossroads Meal Program – Provides a hot meal to Bellevue residents. Meals are served at 6pm M-F at Crossroads Community Center, 16000 NE 10th St. Bellevue

Children's Hospital and Regional Medical Center

1135 116th Ave NE, Suite 400, Bellevue, WA 98004

425.454.4644, TDD 206.987.8903

Children's delivers superior patient care, advances new discoveries and treatments in pediatric research, and serves as the main pediatric teaching site for the University of Washington School of Medicine.

www.seattlechildrens.org

Crisis Clinic

1515 Dexter Ave N, Suite 300, Seattle, WA 98109

206.461.3210

Caregiver Information and Assistance Program 206.461.3200, 800.621.INFO, TDD 206.461.3610

Helps caregivers of older adults and adults with disabilities locate health and long-term care resources and find ongoing support.

Caregiver Specialist assists with complex or crisis situations.

Offers free respite care and care planning sessions to help caregivers and their families in an emergency.

Disability Information and Assistance Program- 206.461.3200, 800.621. INFO, TDD 206.461.3610

The Community Information Line is available to help identify and

clarify needs, as well as locate resources and find support related to their disability.

www.crisisclinic.org

Deaf-Blind Service Center

1620 18th Ave., Suite 200, Seattle, WA 98122

TDD 206.323.9178

Provides information and referral to community resources, advocacy, case management, interpreter training, community education, and support services.

Office of Deaf and Hard of Hearing

360.902.8000 (Voice/TTY)

800.7930 (Voice/TTY)

odhh@dshs.wa.gov

Down Syndrome Community

10415 180th St. SE, Snohomish, WA 98296

www.downsyndromecommunity.org

Maintains a network of individuals, families, and groups affected by Down Syndrome.

DSHS- Aging and Disability Services Administration- Developmental Disabilities Division

1700 E Cherry St, Suite 200, Seattle, WA 98122

206.568.5700, 800.314.3296, TDD 206.720.3325

www.dshs.wa.gov

Coordinates state-funded services for clients with developmental disabilities.

Easter Seals Washington

157 Roy St, Seattle, WA 98109

206.281.5700, 800.678.5708

www.wa.easter-seals.org

Services are provided to children and adults with disabilities (developmental, mental, visual, hearing, speech, learning, , physical), their families, and others working on their behalf. Provides information and referral, helps with application for handicapped parking, and operates summer camps for children and adults.

Elder and Adult Day Services

12831 NE 21st PL, Bellevue, WA 98005

425.867.1799

www.eads-cares.org

Provides adult day health services for adults with disabilities both physical and developmental. (also serves frail elders) Includes

health services and daily social, therapeutic, and rehabilitative activities.

Epilepsy Foundation of Washington

3800 Aurora Ave, N, Suite 370, Seattle, WA 98103

206.547.4551, 800.752.3509

www.epilepsyfoundation.org/washington

Offers information and referral services for the public on epilepsy and seizure disorders

Highline Community College Integration Program

23830 Pacific Highway S.

Kent, WA 98032

206.878-3710, x5134

www.flightline.highline.edu

Kindering Center

16120 NE 8th St. Bellevue, WA 98008

425.747.4004

www.kindering.org

Early intervention services for children who have developmental disabilities and who are 3 years old or younger.

Lighthouse for the Blind

2501 S Plum St, Seattle, WA 98144

206.322.4200, TDD 206 324.1388

www.seattlelighthouse.org

Employment training program serves persons who are seeking jobs in manufacturing at the Lighthouse as well as off-site jobs in customer service and office support positions.

Multiple Sclerosis Association of King County

753 N 35th ST, Suite 208, Seattle, WA 98103

206.633.2606

www.msakc.org

Provides social and rehabilitative services for people with Multiple Sclerosis and their families.

Muscular Dystrophy Association

701 Dexter Ave N, #106, Seattle, WA, 98109

206.283.2106

www.mdausa.org

Provides medical support, including initial diagnosis, second opinions, and treatment. Muscular Dystrophy support groups are offered at the UW Medical Center campuses in Bellevue and Seattle.

NAD - National Association of the Deaf

8630 Fenton Street, Suite 820, Silver Spring, MD 20910

301-587-1788, TTY: 301-587-1789

By Appointment

www.NAD.org

Northwest Center

1600 W Armory Way, Seattle, WA 98119

206.285.9140

www.nwcenter.org

Provides evaluation, training, work center employment, and training in clerical, janitorial, food services and word processing skills for adults, 21 years and older with developmental disabilities.

Outdoorsforall

1621 114TH Ave SE, Suite 132, Bellevue, WA 98004

206.462.0978

www.outdoorsforall

Recreational Programs for people with Disabilities.

Special Olympics Washington (SOWA)

2150 N 107th St, #220, Seattle, WA 98133

206.362.4949, 800.752.7559

www.sowa.org

Provides sports training and activities and organizes seasonal sports for fall winter, spring and summer.

Washington Coalition of Citizens with Disabilities

4649 Sunnyside Ave. N, suite 100, Seattle, WA 98103

206.545.7055, 866.545.7055

Disability Resource Network

16315 NE 87th St, Suite B3, Redmond, WA 98052

425.558.0993, 800.255.1147

Offers information and referral to community resources. Offers assistance with independent living skill, housing, and employment.

Washington Council of the Blind (WCB)

1503 5th Ave W, Seattle, WA 98119

800.255.1147

www.wcbinfo.org

Provides information and referral, publications in various media, meetings, and scholarships to visually impaired clients who are attending college or participating job training programs.

Washington State Department of Services for the Blind

4311 S Alaska St, Seattle, WA 98118

206.721.4422, 800.552.7103, TDD 206.721.4056

www.dsb.wa.gov

Works with clients in gaining the necessary skills, equipment, and access to opportunities to reach the employment goal of their choice.

PUBLICATIONS

Cohen, J. (2003). *Disability Etiquette: Tips on Interacting with People with Disabilities*. Jackson Heights, NY: Eastern Paralyzed Veterans Association . Email: info@unitedspinal.org and publications@unitedspinal.org.

Crisis Clinic. (2004). *Where to Turn Plus: Health and Human Services in King County*. Seattle, WA: Community Information Line: 206.461.3200 or toll free at 800.621.4636, TDD – 206.461.3610

Geralis, E. (1991). Children and Cerebral Palsy. A Parent's Guide. Rockville, MD: Woodbine House

Institute for Community Inclusion, Children's Hospital. Don't Forget the Fun: Developing Inclusive Recreation. Boston, MA.

Journal of Autism and Developmental Disorders. Available from Plenum Publishing Corporation, 233 Spring Street, New York, NY 10013.

Kasser, Susan L. (1973) Inclusive Games: Movement Fun for Everyone. Oregon State University, Human Kinetics.

The Washington Trails Association, (1995). *Accessible Trails in Washington's Backcountry: A Guide to 85 Outings*. Seattle, WA: The Mountaineers.

WEB SITES

Administration on Developmental Disabilities

www.acf.hhs.gov/programs/add

American Association of People with Disabilities

www.aapd.com

Americans with Disabilities Act (ADA Home Page)

www.ada.gov

The ARC of the United States

www.thearc.org

C.H.A.D.D.(Children and Adults with Attention-Deficit/Hyperactivity Disorder)

www.chadd.org

Department of Justice

www.usdoj.gov

DisabilityInfo.gov

www.disability.gov/

Division on Mental Retardation & Developmental Disabilities

www.dshs.wa.gov/ddd

Ideal Lives

www.ideallives.com/

Inclusion. Com

www.inclusion.com/

The Inclusion Network-working to Build a More Inclusive world by engaging people with disabilities in our daily lives

The National Association for Child Development

www.nacd.org

National Attention Deficit Disorder Association

www.add.org

National Center on Birth Defects and Developmental Disabilities

www.cdc.gov/ncbddd

National Dissemination Center for Children with Disabilities

www.nichcy.org

National Institute on Disability and Rehabilitation Research

www.ed.gov/offices/OSERS/NIDRR

National Institute of Neurological Disorders and Stroke

www.ninds.nih.gov/

Parents with Disabilities Online

www.disabledparents.net/

World Association of Persons with Disabilities

www.wapd.org/

1. Do you have any written policies or procedures that describe the way your programs and services are offered to the public?

Department/Unit	All	Yes	Notes
City Attorney	1	1	
City Clerk	3	3	
Civic Services	3	3	
Communications	1	0	Online privacy and security, web policies
Finance	3	1	
Fire	3	1	Internet
Human Resources	1	0	
IT	5	2	
Parks	27	22	
PCD	9	8	
Police	27	23	
Transportation	8	8	RoW group has policy and procedures manual; online permit center; look at SOPs; BCC 14.60.181
Utilities	13	7	

2. Does your program have any specific policies or procedures for determining whether the health condition and/or behavior of a person with a disability pose a significant risk to the health or safety of others?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	1	
Communications	1	0	
Finance	3	0	
Fire	3	1	In relation to employment
Human Resources	1	0	
IT	5	0	
Parks	27	5	
PCD	9	0	
Police	27	19	
Transportation	8	0	
Utilities	13	1	

3(a) Does your program use any kind of application form for any of its programs, services, or activities? (Applications can/may include paid, non-paid, volunteer, community service, etc.)

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	2	
Communications	1	0	
Finance	3	1	
Fire	3	3	For ride-alongs and CPR
Human Resources	1	0	
IT	5	3	
Parks	27	19	
PCD	9	6	
Police	27	11	
Transportation	8	7	Web access to make traffic management request and CAR for NEP; all permit applications
Utilities	13	4	

3(b) Are the forms available in alternative formats for persons with sight, hearing, mobility, or cognitive disabilities?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	0	
Parks	27	10	
PCD	9	2	
Police	27	3	
Transportation	8	1	RoW – try to keep in Word as universal format
Utilities	13	1	

4. Are there any circumstances in which a person with a disability would not be given an equal opportunity to participate in and benefit from any of your programs or activities or to receive any services?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	1	
Parks	27	3	
PCD	9	2	
Police	27	5	
Transportation	8	0	
Utilities	13	1	

5. Do you offer any separate programs or services that are exclusively for people with disabilities and not for others?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	2	
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	0	
Parks	27	6	
PCD	9	0	
Police	27	2	
Transportation	8	0	
Utilities	13	1	

6. Are people with disabilities given the opportunity to participate in regular programs if they so choose?

Department/Unit	All	Yes	Notes
City Attorney	1	1	
City Clerk	3	3	
Civic Services	3	3	
Communications	1	0	
Finance	3	0	
Fire	3	2	
Human Resources	1	0	
IT	5	3	
Parks	27	22	
PCD	9	8	
Police	27	14	
Transportation	8	7	Transportation Commission; ASL and accessible locations
Utilities	13	6	

7. Is staff aware that they may be required to make reasonable modifications to program or service policies and practices in order to serve people with disabilities?

Department/Unit	All	Yes	Notes
City Attorney	1	1	
City Clerk	3	2	
Civic Services	3	3	
Communications	1	0	
Finance	3	1	
Fire	3	2	Informal, we need a policy
Human Resources	1	0	
IT	5	1	
Parks	27	23	
PCD	9	8	
Police	27	21	
Transportation	8	7	
Utilities	13	9	

8(a) Do your programs have a process for responding to requests for these modifications?

Department/Unit	All	Yes	Notes
City Attorney	1	1	
City Clerk	3	1	
Civic Services	3	3	
Communications	1	0	
Finance	3	1	
Fire	3	1	
Human Resources	1	0	
IT	5	0	
Parks	27	19	
PCD	9	6	
Police	27	13	
Transportation	8	4	WB-56, WB-49
Utilities	13	7	

8(b) If your answer to 8(a) is "YES" is it:

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	2	
Communications	1	0	
Finance	3	0	
Fire	3	0	Formal: Special Request form on internet and informal as essential element of customer service
Human Resources	1	0	
IT	5	0	
Parks	27	6	Informal/Formal
PCD	9	2	Informal/Formal
Police	27	10	Informal/Formal
Transportation	8	2	Informal/Formal
Utilities	13	0	Informal

9. Are people with disabilities informed that your programs will make reasonable accommodations, if necessary, to afford them the opportunity to participate?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	2	
Civic Services	3	1	
Communications	1	0	
Finance	3	1	
Fire	3	1	On internet ADA page
Human Resources	1	0	
IT	5	0	
Parks	27	17	
PCD	9	5	
Police	27	11	
Transportation	8	3	
Utilities	13	4	

10. Do your programs have a process for determining whether providing a specific program or policy modification for persons with disabilities would fundamentally alter the nature of the program? (A modification is not required by the ADA if it would fund

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	0	
Parks	27	6	
PCD	9	1	
Police	27	1	
Transportation	8	0	
Utilities	13	2	

11. Do your programs charge people with disabilities additional fees to cover the cost of any actions taken to comply with the ADA, including providing disability accommodation?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	0	
Parks	27	0	
PCD	9	0	
Police	27	0	
Transportation	8	0	
Utilities	13	0	

12. Does your program have a policy concerning the admission of guide dogs or service animals into your facilities?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	1	
Communications	1	0	
Finance	3	0	
Fire	3	1	Service animals allowed by state law
Human Resources	1	0	
IT	5	0	
Parks	27	13	
PCD	9	2	
Police	27	5	
Transportation	8	2	
Utilities	13	1	

13. Does your program use contractors to provide the City's public programs, activities, and services?

Department/Unit	All	Yes	Notes
City Attorney	1	1	
City Clerk	3	0	
Civic Services	3	1	
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	2	
Parks	27	21	
PCD	9	2	
Police	27	6	
Transportation	8	6	Traffic – about 40%
Utilities	13	6	

14. Are there any notices provided at your program site that inform the public about the City of Bellevue's compliance with the ADA?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	1	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	0	
Parks	27	7	
PCD	9	3	
Police	27	6	
Transportation	8	1	
Utilities	13	2	

15. Does your program provide information to the public via the City website?

Department/Unit	All	Yes	Notes
City Attorney	1	1	
City Clerk	3	3	
Civic Services	3	1	
Communications	1	1	
Finance	3	1	
Fire	3	3	
Human Resources	1	0	
IT	5	3	
Parks	27	22	
PCD	9	7	
Police	27	13	
Transportation	8	8	
Utilities	13	8	

16. If "YES", is the information your department posts on the City website ADA compliant and conform to ADA standards and guidelines for accessibility?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	0	
Communications	1	1	For the most part
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	0	
Parks	27	5	
PCD	9	1	
Police	27	1	
Transportation	8	2	
Utilities	13	2	

17. Are your program brochures and other informational materials available in a format accessible to people with vision, hearing, cognitive or mobility disabilities by providing auxiliary aids or alternative formats?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	0	
Parks	27	7	
PCD	9	1	
Police	27	2	
Transportation	8	0	
Utilities	13	1	

18. Do you have a policy or procedure for making print materials available upon request in accessible format to people with disabilities?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	0	
Parks	27	12	
PCD	9	3	
Police	27	2	
Transportation	8	2	
Utilities	13	1	

19(a) Does your program have a policy, formal procedure, or informal process for providing auxiliary aids and services upon request to ensure effective communication for people with disabilities who participate in your programs or receive services?

Department/Unit	All	Yes	Notes
City Attorney	1	1	
City Clerk	3	3	
Civic Services	3	1	
Communications	1	0	
Finance	3	0	
Fire	3	1	
Human Resources	1	0	
IT	5	0	
Parks	27	13	
PCD	9	8	
Police	27	13	
Transportation	8	2	
Utilities	13	4	

19(b) If your answer was "YES" to 19(a) is it:

Department/Unit	All	Yes	Notes
City Attorney	1	0	Formal
City Clerk	3	0	Informal
Civic Services	3	0	Informal
Communications	1	0	
Finance	3	0	
Fire	3	1	Informal: At city Hall by request
Human Resources	1	0	
IT	5	0	
Parks	27	2	Informal/Formal
PCD	9	5	Informal/Formal
Police	27	6	Informal/Formal
Transportation	8	1	Informal/Formal
Utilities	13	1	Informal/Formal

20. Do you have a relay service, TTY or text telephone for communicating with customers who have hearing or speech impairments?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	1	
Communications	1	0	711 service advertised on web
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	2	
Parks	27	14	
PCD	9	6	
Police	27	23	
Transportation	8	4	
Utilities	13	5	

21. Is the TTY and relay service number listed on your brochures and in advertisements?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	1	
Human Resources	1	0	
IT	5	1	
Parks	27	13	
PCD	9	4	
Police	27	8	
Transportation	8	2	
Utilities	13	4	

22(a) Do your employees/staff know how to use the relay service?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	2	
Human Resources	1	0	
IT	5	0	
Parks	27	8	
PCD	9	3	
Police	27	16	
Transportation	8	1	
Utilities	13	4	

22(b) Do your employees/staff know how to use the TTY to make a call?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	2	
Human Resources	1	0	
IT	5	0	
Parks	27	5	
PCD	9	3	
Police	27	14	
Transportation	8	1	
Utilities	13	4	

22(c) Do your employees/staff know how to use the TTY to receive a call?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	1	
Civic Services	3	1	
Communications	1	0	
Finance	3	0	
Fire	3	1	Primarily a dispatch function
Human Resources	1	0	
IT	5	0	
Parks	27	6	
PCD	9	3	
Police	27	17	
Transportation	8	1	
Utilities	13	4	

23. Are receptionists/operators available on automated telephone lines (available by pressing "0") for assisting persons with disabilities?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	1	
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	0	
Parks	27	6	
PCD	9	3	
Police	27	4	
Transportation	8	0	
Utilities	13	1	

24. Have automated telephone lines been tested and configured to be compatible with TTY's or other telecommunication devices for persons who are deaf or hard of hearing?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	0	
Parks	27	0	
PCD	9	2	
Police	27	5	
Transportation	8	0	
Utilities	13	1	

25. Are printed materials and program information available in alternative formats for the blind or visually impaired (in large print or Braille, on audiocassette or diskette, or to be read by staff)?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	1	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	0	
Parks	27	13	
PCD	9	0	
Police	27	5	
Transportation	8	0	
Utilities	13	2	

26. Does your program have a policy or procedure for determining what constitutes a fundamental alteration in the nature of a program, service, or activity, or what constitutes an undue financial and administrative burden for the City with respect to ADA?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	0	
Parks	27	4	
PCD	9	0	
Police	27	1	
Transportation	8	2	
Utilities	13	1	

27. Does your department, or do any of your programs hold or sponsor any public meetings?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	2	
Civic Services	3	1	
Communications	1	0	
Finance	3	0	
Fire	3	2	
Human Resources	1	0	
IT	5	2	
Parks	27	23	
PCD	9	7	
Police	27	19	
Transportation	8	6	
Utilities	13	3	

28. Does your department, or do any of your programs show films or videos to the public?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	1	
Civic Services	3	0	
Communications	1	0	
Finance	3	0	
Fire	3	2	
Human Resources	1	0	
IT	5	3	
Parks	27	17	
PCD	9	3	
Police	27	13	
Transportation	8	5	
Utilities	13	7	

29. Are members of your department familiar with the American with Disabilities Act, Title II- Public Entities?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	1	
Civic Services	3	2	
Communications	1	0	
Finance	3	2	
Fire	3	2	Department need education in this area
Human Resources	1	0	
IT	5	0	
Parks	27	15	
PCD	9	5	
Police	27	15	
Transportation	8	6	
Utilities	13	3	

30. Do members of your department need additional training regarding the requirements of Title II of ADA?

Department/Unit	All	Yes	Notes
City Attorney	1	1	
City Clerk	3	2	
Civic Services	3	1	
Communications	1	0	
Finance	3	0	
Fire	3	1	
Human Resources	1	0	
IT	5	2	
Parks	27	19	
PCD	9	4	
Police	27	10	
Transportation	8	2	
Utilities	13	4	

31. Does your program have a policy and procedure for the maintenance of any accessibility features for keeping accessible paths of travel free of obstructions?

Department/Unit	All	Yes	Notes
City Attorney	1	1	
City Clerk	3	1	
Civic Services	3	2	Comply with building codes for accessibility
Communications	1	0	
Finance	3	0	
Fire	3	1	
Human Resources	1	0	
IT	5	0	
Parks	27	16	
PCD	9	3	
Police	27	5	
Transportation	8	4	Permit conditions and Construction Rules
Utilities	13	3	

32. Does your department, or do any of your programs ever provide or arrange for transportation as part of a program, activity, or service offered to the public?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	1	Service First will arrange for ACCESS vans or cabs upon request
Communications	1	0	
Finance	3	0	
Fire	3	0	
Human Resources	1	0	
IT	5	0	
Parks	27	18	
PCD	9	1	
Police	27	9	
Transportation	8	0	
Utilities	13	2	

33. Does your department sponsor any City of Bellevue special events for the general public?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	0	
Civic Services	3	2	
Communications	1	0	
Finance	3	0	
Fire	3	2	
Human Resources	1	0	
IT	5	1	
Parks	27	24	
PCD	9	6	
Police	27	16	
Transportation	8	4	Project open houses; partner in 4 th of July, Arts Fair
Utilities	13	11	

34. Do you or your staff assist with emergency evacuation of facilities?

Department/Unit	All	Yes	Notes
City Attorney	1	1	
City Clerk	3	2	
Civic Services	3	3	
Communications	1	0	
Finance	3	1	
Fire	3	2	
Human Resources	1	0	
IT	5	3	
Parks	27	22	
PCD	9	7	
Police	27	26	
Transportation	8	5	
Utilities	13	4	

35. Are staff members trained to deal appropriately with individuals who have differing disabilities?

Department/Unit	All	Yes	Notes
City Attorney	1	0	
City Clerk	3	1	
Civic Services	3	3	
Communications	1	0	
Finance	3	0	
Fire	3	1	Need training
Human Resources	1	0	
IT	5	0	
Parks	27	11	
PCD	9	4	
Police	27	14	
Transportation	8	1	
Utilities	13	1	

36. Final Comments?

Department/Unit	All	Yes	Notes
City Attorney	1		
City Clerk	3		
Civic Services	3		
Communications	1		
Finance	3		
Fire	3		
Human Resources	1		
IT	5		
Parks	27		
PCD	9		
Police	27		
Transportation	8		
Utilities	13		

Documentation Received:

City Clerks Office:	Guide to Public Hearings Rules of Procedure Disclosure of Public Records Public Records Code Public Records Act Model Rules
Civic Services:	Variety of forms used by Service First Examples of web sites, policies, and forms from facilities management
Facilities:	
Parks:	Choices for People with Disabilities Recreation Program Plan Reasonable Accommodation Guidelines for Recreation Programs
Police:	Deaf and Hard of Hearing Persons policy Meetings accommodation notice
Transportation:	Development Services Frequently Asked Questions Radar Sign Program (with application) Special Conditions for Permit Pedestrian Access during Construction Neighborhood Traffic Calming Brochure Ped-Bike Plan Accessibility Policies
Utilities:	Utility Rebate and Rate Reduction Program (and application) Examples with offer for information in alternate formats: Latex paint disposal postcard Utility Bill

Summary of ADA Parking Compliance at Fire Stations
per 2010 ADA Standards for Accessible Design; Chapter 5: General Site and Building Elements

yes = compliant
no = noncompliant

FS #1	FS #2	FS #3	FS #4	FS #5	FS #6	FS #7	FS #8	FS #9	PSTC			
												502 Parking Spaces
												502.1 General
no	no	no	no	no	no	no	no	no	no			502.2 Vehicle Spaces. Van spaces shall be 11' wide and shall have adjacent access aisle.
yes	no	no	yes	no	no	no	yes	no	yes			Exception: Van space may be 8' wide if access aisle is also 8' wide (minimums).
yes	yes	yes	yes	no	yes	no	yes	no	yes			502.3 Access aisle. Access aisle shall adjoin an accessible route. Accessible route must connect parking spaces to accessible entrances.
yes	yes	no	yes	no	no	no	yes	yes	yes			502.3.1 Width. Access aisle shall be 60" (5') min.
yes	yes	yes	yes	yes	yes	no	yes	yes	yes			502.3.2 Length. Access aisle shall be full length of parking space.
yes	yes	yes	yes	yes	yes	no	yes	yes	yes			502.3.3 Marking. Access aisles shall be marked to discourage parking in them.
yes	yes	yes	yes	no	yes	no	yes	yes	yes			502.3.4 Location. Access aisle shall not overlap the vehicular way.
no	no	no	no space yes aisle	no	yes	no	no	no	no			502.4 Floor or ground surfaces. Parking spaces and access aisles shall be stable, firm and slip resistant (compliant with 302). Access aisles shall be at the same level as the spaces they serve. Built-up curb ramps are not permitted to project into access aisles because they would create slopes greater than 1:48.
no	no	no		no	yes	no	no	no	no			Exception: Slopes not steeper than 1:48 are permitted. (2%)
yes	yes	yes	yes	yes	yes	yes	yes	yes	yes			502.5 Vertical clearance. Van spaces shall have a vertical clearance of 98"
yes	yes	no	yes	no	no	no	no	no	no			502.6 Identification. Space identification signs shall include the International Symbol of Accessibility. Van parking stalls shall read "van accessible". Signs shall be installed 60" min. above finish floor or ground surface measured to bottom of sign.
no	no	no	no	no	no	no	no	no	no			Signs shall be installed 60" min. above finish floor or ground surface measured to bottom of sign.
yes	yes	yes	yes	no	yes	yes	yes	no	yes			502.7 Relationship to accessible route. Parked vehicles can not obstruct accessible route minimum clearance of 36".

Notes:

All stations - Signs installed too low.

FS #1 - Built up curb ramp within access aisle too steep.

FS #4 - Parking stall surface is 1/2 concrete and 1/2 asphalt. Concrete 1/2 is fairly level, but asphalt 1/2 is steeply sloped.

FS #7 - No access aisle

FS #8 - Route to door is not "accessible", too many slopes.

PSTC - Route to door is too steep for the first 16'-8".

11/8/2011

Bellevue Fire Department
ADA Assessments of the Public (Lobby) Areas in Stations

Fire Station #1

The ADA accessible entrance is not along the ADA accessible route. The accessible parking is nearest to a door on the east side of the building that enters onto the second floor of the station. There are no public spaces on the second floor. The public lobby area is on the first floor and is entered through an ADA accessible west facing door. The lobby itself is ADA compliant.

Emergency phone is installed at an acceptable height. Cabinet may be hard to open for someone with limited use of their hands.

Check to see if height of brochure rack is compliant.

Exterior tactile signage is too high (703.4.1). *Relocate the sign to a lower position.*

Fire Station #2

Emergency phone is installed at an acceptable height. Cabinet may be hard to open for someone with limited use of their hands.

The door jamb is too deep (11"). 404.2.4.3 states that there shall be no obstruction that protrudes more than 8" beyond the surface of the door. The Advisory states that a door can be recessed due to wall thickness. *Reinstall the door in a new frame where the door is centered within the wall thickness.*

The threshold is high, but compliant due to the exception in 404.2.5 that states an existing threshold at a doorway can be $\frac{3}{4}$ " high maximum if it has a beveled edge on each side not steeper than 1:2. *Create a more compliant threshold when a new frame (and threshold) is installed to meet the above compliance issue.*

The tile floor is too sloped near the door.

Fire Station #3

Emergency phone is installed too high (308.2.1). Cabinet may be hard to open for someone with limited use of their hands.

The change in level at the threshold exceeds the maximum and is therefore not compliant (404.2.5).

Fire Station #4

Emergency phone is installed at an acceptable height. Cabinet may be hard to open for someone with limited use of their hands.

The change in level at the threshold exceeds the maximum and is therefore not compliant (404.2.5).

Lobby itself is compliant.

Bellevue Fire Department
ADA Assessments of the Public (Lobby) Areas in Stations

Fire Station #5

Fire Station #6

"Please ring for assistance" sign installed too high (308.2.1)

Minimum maneuvering clearance at door not met (404.2.4.1), latch approach, pull side. "If no one answers..." sign installed too high (308.2.1)

The change in level at the threshold exceeds the maximum and is therefore not compliant (404.2.5).

Fire Station #7

Lobby turning space is fine.

Emergency phone is installed at an acceptable height. Cabinet may be hard to open for someone with limited use of their hands.

"Emergency Phone" sign installed too high (703.4.1).

Doorbell is too high (308.2.1).

"Please ring for assistance" sign too high (308.2.1).

Fire Station #8

Emergency phone is installed at an acceptable height. Cabinet may be hard to open for someone with limited use of their hands. Sign is also compliant.

There is a unisex restroom off of the lobby. The toilet is installed too far from the wall (604.2).

The flush control is on the wrong side (604.6).

Check to see if the toilet paper dispenser is too far forward...7-9" from front of toilet (604.7).

The rear grab bar is not extended to the right far enough, 24" min. from center line (604.5.2).

The mirror is installed too high, it should be 40" AFF (603.3).

Fire Station #9

There are many signs at the entrance. They are all installed too high (703.4.1).

The doorbell is installed too high (308.2.1).

Emergency phone is installed too high (308.2.1). Cabinet may be hard to open for someone with limited use of their hands.

Bellevue Fire Department

ADA Assessments of the Public (Lobby) Areas in Stations

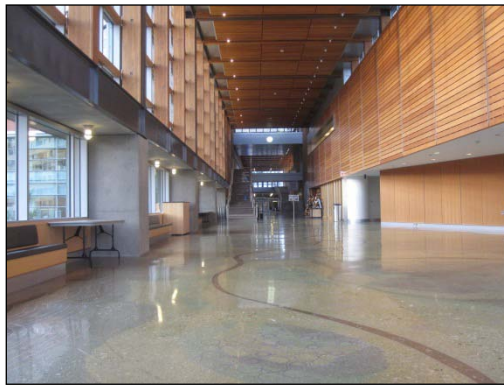
The brochure display is too high (308.2.1). *Reinstall so the top row of brochures is no higher than 48" AFF.*

The threshold is high, but compliant due to the exception in 404.2.5 that states an existing threshold at a doorway can be $\frac{3}{4}$ " high maximum if it has a beveled edge on each side not steeper than 1:2.



City of Bellevue

ADA Facility Accessibility Survey – Phase II



City of Bellevue
Post Office Box 90012
Bellevue, WA 98009-9012
Attn. Ms. Susan Harper

Submitted on December 13, 2012

Endelman & Associates PLLC

Accessibility Consulting ■ ADA – FHA Compliance

William E. Endelman, AIA, Principal

Endelman & Associates PLLC

Accessibility Consulting ■ ADA – FHA Compliance

William E. Endelman, AIA, Principal

December 13, 2012

Ms. Susan Harper, Sr. Project Manager
Facilities Planning and Development
450 110th Ave. NE
P.O. Box 90012
Bellevue, WA 98009

VIA E-Mail: SHarper@bellevuewa.gov

Re: City of Bellevue Phase II Buildings ADA Survey
E&A Project #12.347.1

Dear Ms. Harper:

Endelman & Associates PLLC is pleased to present this ADA Facility Survey Report (Phase II) of 10 City-owned facilities. We trust you will find the report thorough and useful for your efforts to remove barriers to accessibility. Along with the hard copy report, we have provided password access to the new Survey Solutions database software. This replaces the previous Survey Manager Software, used in Phase I. Phase I data has been transferred to the database as a separate project. The web database will help you manage the survey data over time as barriers are removed, export data to Excel spreadsheets, and print reports.

Each facility report is in a separate tabbed section, arranged alphabetically, which includes the ADA Survey Results Matrix and captioned photo pages of representative conditions.

The Overview / Executive Summary explains the survey context and how to use the report. This leads to an important recommendation – E&A recommends that anyone receiving a copy of any portion of the report data be provided the Overview / Executive Summary Section. This section answers many questions, and helps ensure that the data is used properly.

It has been my pleasure working with you and the City's team, and we will be glad to provide you with any clarifications you require regarding the content in our report.

Sincerely,



William E. Endelman, AIA, Principal
Endelman & Associates PLLC

BellevuePHII-CvrLtr

City of Bellevue - Phases II- ADA Surveys – Public Spaces

PHASE II ADA FACILITY SURVEY REPORT

Prepared by: Endelman & Associates PLLC – December 13, 2012

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Section 2 - APPENDIX / LEGEND

- A. Abbreviations
- B. Legend for the ADA Survey Results

Sections 3 - ADA SURVEY RESULTS - For each of the following facilities, a Detailed Matrix of observed issues, captioned photo pages and key plans as provided are in separate tabbed sections in multiple volumes, alphabetically.

1. Bellevue Aquatic Center - Site and Facility
2. Bellevue Botanical Gardens (BBG) - Paths in gardens, route of travel through park, gift shop; excludes caretakers house, parking lot at gardens to be demolished
3. Bellevue Golf Course - 18 Holes, driving range, putting green, Pro shop
4. City Hall Interior Public Areas Only - Concourse, Lev. 2 Training, City Mgr., West Wing Flr. 3 Deli
5. Crossroads Community Park & Center - Building Site and Facility - incl. Annex / Golf Course & International Area
6. Downtown Park
7. Kelsey Creek Farm & Park - Barns, features & Site
8. Northwest Art Center - Building
9. Robinswood Community Park - Incl. Barn, Park House, Cabana, ball fields , concession building, restrooms, tennis center (indoor & outdoor)
10. Wilberton Hill Park - Upper and lower parking lot by ball fields, route connecting to BBG, 2 baseball, 1 soccer, picnic, tot lot, playground

BellevuePhIIExecSum.docx

City of Bellevue - Phases II- ADA Surveys – Public Spaces

PHASE II ADA FACILITY SURVEY REPORT

Prepared by: Endelman & Associates PLLC – December 13, 2012

I. OVERVIEW / SCOPE OF SERVICES

City of Bellevue contracted with Endelman & Associates PLLC (E&A herein), to perform Phase II of an Americans with Disabilities Act (ADA) Survey of public areas of 10 City owned facilities in Bellevue, Washington. This list represents Phase II of the ADA Surveys, City selected facilities offering City programs. E&A had previously performed a Phase I ADA Survey of 4 selected facilities in 2008. We understand that it is the City's intention to complete remaining City owned facility surveys in additional Phases. This ADA Facility Survey is an effort to identify observed barriers to program accessibility in the public areas of existing City facilities for compliance with the "program accessibility" requirements of Title II of the Americans with Disabilities Act.

It is important to understand that the facilities are one component of City program accessibility, and E&A's scope of work is limited to facility access only. Additionally, there may be many available programmatic solutions for facility access, such as relocating programs to alternate accessible locations. However, the focus of this report is on removing physical barrier at each facility in order to provide enduring program access.

This ADA Facility Survey was performed to assess observed barriers under the ADA located in public areas of the facilities. Employee-only (or staff areas) were not assessed or part of E&A's scope of work, with some minor exceptions. Specifically excluded are assessments of staff-only (employee) areas where the public is not given self directed access. Under Title I of the ADA, the City must make "reasonable accommodation" to employees with disabilities. However, staff-only areas are beyond E&A's scope of work.

E&A is also providing preliminary "Recommended Solutions" to remove each barrier, along with itemized budget costs. Title II of the ADA requires Owners to remove barriers to programs over time to the extent that it is "does not cause an undue burden". In this report, the "Owner" refers to the City.

This Report does not evaluate whether the facility was constructed in full compliance with the applicable Building Code accessibility provisions in force at the time of the original permit, or during any subsequent renovations. Note that Building Code accessibility compliance is not enforced retroactively. However, ADA compliance is retroactive and is a Civil Rights Law that presents the biggest exposure from a risk management perspective. It is important to note that in obtaining a building permit for any areas to be renovated for ADA compliance, there may be some more stringent dimensional aspects under the current building Code that would also apply.

This survey does not address "auxiliary aids" or operational issues ensuring that people with disabilities are not denied equivalent services, such as provision of interpreters or Braille printed material.

The field ADA Facility Surveys for the properties were conducted using proven ADA Survey instruments and calibrated measurement tools. Collected data was reviewed and analyzed, and recommended preliminary solutions were developed to result in the ADA Facility Survey Report. We used Endelman & Associates PLLC's custom Survey Solutions™ Software database to generate the ADA Survey Results section. The field ADA Surveys were performed between April and November 2012.

Each item in the ADA Survey Results for each building, that follows this Overview & Executive Summary, includes the *ADA Accessibility Guidelines (ADAAG) Citation*, the *Observed Barrier, Location, General Priority (PR)*, a *"Sufficiency" Code*, and a *Comments* field per item. (Please see "Survey Legend" in Appendix B for definitions.)

The Report includes captioned photographs of typical or unique conditions, along with limited key reference plans for the most complex buildings, where provided by the City.

ADA Survey Standard

This survey is an assessment to determine compliance with the Americans with Disabilities Act (ADA) using a "safe harbor" technical standard. The 2010 ADA Standards for Accessible Design (and Regulations under 28 CFR Part 36) were adopted 9/15/10 to replace the original 1991 ADA Standards for Accessible Design (with its ADA Accessibility Guidelines [ADAAG] Appendix section revision dated July 1, 1994). Under Title III, there was an 18 month "grace period" which has expired, during which the 1991 Standards or the 2010 ADA Standards (ADAS) may be used. A single standard must be selected in its entirety for ADA compliance of all elements of a building, and "cherry picking portions of each is not permitted. The Phase II project was surveyed using the new 2010 ADAS in full force effective March 15, 2012.

All facilities built after January 23, 1993 should have been constructed in full compliance with the ADA per the 1991 Standards. Facilities predating this date should have their programs made accessible to the extent "it is not an undue burden".

The new regulations offer a "safe harbor" for elements that were built or altered between 1992 and 2012 and that conform to the original 1991 ADA Standards. Any such elements that meet the 1991 Standards can remain in place indefinitely until such time as they are physically altered. As an example, light switches installed at 54 inches above the floor in conformance with the old ADAAG may remain in place until they are altered in future remodeling projects, even though the 2010 ADAS require light switches to be installed no higher than 48 inches above the floor.

In some instances, the 2010 ADAS are more stringent. Also, in some instances, the 2010 ADAS are less stringent than the original ADAAG, and in these cases accessibility can be reduced to the level of the 2010 ADAS. As an example, the location of an accessible toilet centerline in the original ADAAG must be 18" exactly to a side wall. In the 2010 ADAAS, the toilet may be between 16" and 18" to the side wall.

There are also 14 new scoping elements that must comply now with the 2010 ADAS that did not appear at all in the original ADAAG. The 14 new scoping areas include some items that do apply to these facilities:

(A) Residential facilities and dwelling units (B) Amusement rides, (C) Recreational boating facilities, (D) Exercise machines and equipment, (E) Fishing piers and platforms, (F) Golf facilities, (G) Miniature golf facilities, (H) Play areas, (I) Saunas and Steam rooms, (J) Swimming pools, wading pools, and spas, (K) Shooting facilities with firing positions (L) Miscellaneous - (1) Team or player seating, (2) Accessible route to bowling lanes, (3) Accessible route in court sports facilities

Per Title III of the ADA, existing public sector facilities are subject to the continuing obligation to make facilities accessible to the extent “readily achievable”.

II. OVERVIEW OF ADA REQUIREMENTS

A. BACKGROUND

The Americans with Disabilities Act of 1990 (ADA) is civil rights legislation designed to extend civil rights protection to persons with disabilities. It is not a building code, although many of the technical requirements in ADAAG resemble technical standards of a building code. It is primarily administered by the Department of Justice. A complaint can be filed by any person, and fines and other penalties may be assessed as determined by the Department of Justice. In addition, the ADA includes a mechanism for the Justice Department approval of local codes to be consistent with the requirements of the ADA.

There are four Titles to the Americans with Disabilities Act:

Title I Employment - Prohibits discrimination in hiring and requires employers to provide "reasonable accommodation" to disabled individuals with respect to job description and the work place. Employment accessibility is/was not included in the E&A' scope of work and is not part of this report.

Title II Public Services and Transportation - Prohibits state and local governments from discrimination by requiring "program accessibility". Program accessibility can be attained by rescheduling and/or relocating programs to accessible locations or by making physical facility changes, called "structural changes" in the ADA. Program accessibility must be achieved to the extent that it does not cause "an undue burden", a significantly higher standard than "readily achievable", applicable under Title III, which applies to privately owned “public accommodations”. The ten City Owned Facilities fall under Title II.

Title III Public Accommodations - Places of public accommodations are required to be made accessible where "it is readily achievable", with a deadline for existing facilities as of January 26, 1992. Title III is applicable to the private sector.

Title IV Telecommunications - Applies to companies providing telephone service to the public. They must offer telecommunications devices for the deaf (TDD'S), or other equipment.

Title II applies to the Phases II- ADA Surveys – Public Spaces as part of the City's “program”.

Under Title II, the ADA requires public entities to remove barriers in their existing programs *to the extent that it is does not cause an “undue burden”*. In preparing this report, E&A was not provided confidential information on the details of the City’s finances and/or annual budgeting. Therefore, it is the responsibility of the City to make the final determination of what constitutes does not cause an “undue burden” for the entity in a given year. In addition, the ADA is designed so that accessibility can be achieved over the long term. This means that what is not achievable in year one (based on what is does not cause an undue burden), may be achievable at a future point in time.

Because E&A did not survey areas within staff spaces, E&A is not addressing any potential Title I Employee issues that may be required as “reasonable accommodation” to any disabled employees.

B. TECHNICAL REQUIREMENTS / STANDARDS

The 2010 ADA Standards (ADAS herein) as adopted and enforceable by the U.S. Department of Justice, is the current (effective 3/15/12) technical accessibility standard applicable when constructing new public accommodation facilities or altering existing facilities after January 26, 1993. These standards apply retroactively in requiring owners to remove barriers to existing programs.

When implementing solutions to barrier removal, as an alternative to literally complying with a technical standard cited in ADAS, the ADA allows for an “equivalent facilitation” to accomplish barrier removal. This is acceptable to the extent that such action provides greater or equal access. For example, a pharmacy may provide a free prescription drug delivery service *in lieu of* renovating the entry to the pharmacy. However, the Owner should be aware that providing “operational solutions”, rather than physical facility solutions, is a less enduring approach to barrier removal and may require continued training, monitoring and enforcement of staff operations.

State and local code requirements apply to buildings constructed or renovated under a building permit. These may also apply if, and when renovations are made to remove barriers. As previously stated, E&A assessed for compliance with the currently enforceable 2010 ADA Standards only. Building Code compliance is not applied retroactively, unlike the ADA. Fortunately, ADAS requirements and the current 2009 IBC / 2003 ANSI 117.1 building code are an estimated 95% identical.

C. GENERAL PRIORITIES UNDER THE ADA

The ADA provides general priorities in 28 CFR Part 36.304(c) as guidance only for barrier removal in public accommodations (Title III). These would be reasonable to apply to public entity facilities as well to help prioritize program access per Title II. These are not mandatory priorities, but rather, general guidance as to relative importance. As the Owner makes a determination of phasing and implementation priorities for barrier removal, we recommend taking the ADA general priorities into account, along with other factors including budget, operational issues, and public usage data. In this report E&A has assigned these ADA general priorities (PR) to each noted barrier for guidance only. As part of a Transition Plan, it is the City’s

responsibility to further prioritize removal of barriers to programs based upon finances and program priorities to the extent that it does not cause an “undue financial burden”.

<i>ADA Priorities per 28 CFR Part 36.304(c) as Guidance Only</i>	
1	Provision of access to a place of public accommodation from public sidewalks, <u>parking</u> , or public transportation. These measures include installing <u>entrance</u> ramps, widening entrances, and providing accessible parking spaces/ signage.
2	Provision of <u>access to those places where goods and services</u> are made available. These measures include revising interior routes, adjusting the layout of tables, providing Braille and raised character building signage, widening interior doors, and installing ramps.
3	Provision of <u>accessible restrooms</u> , such as removal of obstructing items on the route to the restroom, widening of restroom doors, widening of toilet stalls, provision of accessible plumbing fixtures, and installation of grab bars.
4	Making <u>other modifications</u> to provide access to the goods, services, facilities, privileges, advantages, or accommodations, such as accessible public <u>phones</u> and <u>water fountains</u> .

III. PHASE II ADA FACILITY SURVEY REPORT OVERVIEW

A. REPORT CONTENTS AND FORMAT

This report is based upon field observations of barriers, as defined by the currently enforceable 2010 ADA Standards (28 CFR Part 35). The complete report for each facility includes the following:

1. The *Overview/ Executive Summary*, with the essential *Assumptions Sections* accompanies the report.
2. The *Appendix* includes an *ADA Survey Results Legend* and *Abbreviation List* in this section.
3. The *ADA Survey Results* is the detailed report of the barriers observed at each public restroom, citations, and comments on ADA compliance. Please reference the *ADA Survey Results Legend* for more information on reading the report. Each building also includes *Captioned Photo Pages* provided for illustrative purposes. Photos are not intended as comprehensive documentation. Where provided and useful, we have included reference key plans.

All Report Data is being provided in electronic format on our customer accessed web based version of Survey Solutions database for the Owner to use in managing a barrier removal program. This new capability is being provided in lieu of the previous stand-alone Survey Manager™ Software used in our Phase I surveys, a Project Status / Report Writer application for the City to manage the data in the database. The Phase I data from E&A’s previous ADA Survey, using the 1994 ADA Accessibility Guidelines, has also been installed and can be accessed on our web based database as a separate “Phase I project”. However, the two phases of data are not able to be commingled for technical software reasons, as well the two different ADA Survey Standards used.

B. ASSUMPTIONS & CONSIDERATIONS

This report divides Assumptions and Considerations into three categories: *Facility*, *General*, and *Technical*.

Facility Assumptions

These assumptions are specific to the City of Bellevue project.

1. *Public Use* – E&A treated the term “public” to mean facilities used by “other than City employees only”. This may include City residents, sports teams and theater troupes, vendors, and other similar outside users.
2. *Operations and Program Information* - We were provided with limited program information concerning facility operations. Solutions for barrier removal were developed based upon our observations of existing conditions and the program information provided.
3. *Private Tenant Spaces* - Spaces that are leased from the city to Tenants, such as a coffee concession or restaurant, were not surveyed as part of this report. E&A assumed that compliance with applicable Codes and Federal laws are a tenant responsibility as defined in City Lease terms. E&A recommends verifying city lease terms at such applicable spaces.
4. *Department Office Spaces* – This ADA Survey addresses public program areas of facilities. In a typical administrative office, this might include a public information counter and/or a conference room (spaces where the public may be directed unescorted). E&A did *not* survey staff areas unless noted herein. If the public is allowed into these areas, the assumption is that the public would only do so in an escorted manner, where any assistance (such as an inaccessible door knob) could be provided by the person escorting. Title I of the ADA covers employee issues, and the city needs to make reasonable accommodations to employees with disabilities, on a personal basis, not a prescriptive standard.
5. *Properties Surveyed* – The list of Phase II properties was selected by the City.
6. *Public Rights-of-Way* – The surveys did not generally include the public right-of-way sidewalks and curb ramps, except where it is explicitly part of the scope or essential to a facility accessible route. Public right-of-way sidewalks and curb ramps are part of the City’s program, but are beyond the scope of this survey and report. Note that Final technical standards for public rights-of-way have not been issued by the Access Board or adopted by DOJ at this time. The Proposed standards (commonly called PROWAG) are in draft form only, and should be used only for guidance. ADAS is recommended to be used as a reasonable standard to the extent technically feasible, and we have used this standard in our survey.
7. *Park Facilities* - Note that technical standards for outdoor developed public recreation areas have not been issued by the Access Board or adopted by DOJ at this time. Specifically excluded from this survey are trails, as opposed to essential outdoor routes connecting amenities. ADAS is recommended to be

used as a reasonable standard to the extent technically feasible, and we have used this standard in our survey.

8. *City Policies for Equivalent Facilitation* – We are not aware of any formal or informal policies that are currently used in facilities to provide an equivalent facilitation. E&A recommends all such operational policies be formally adopted in writing, and signage be posted in a conspicuous location to allow customers to note such available equivalent services.
9. *“Historic” Buildings* - Alterations in historic buildings must comply with the same standards as other alterations to existing buildings unless “it is determined in accordance with defined procedures (ADAS) 202.5 that compliance with accessibility requirements for accessible routes (exterior and interior), ramps, entrances or toilets would threaten to destroy the historic significance of the building or facility.” If this were determined to be the case the exceptions for alterations to qualified historic buildings or facilities for that element shall be permitted to apply.

Although there are many buildings people would believe to be historic or which have unique details, only those buildings registered as a National, State or Local Historic Landmarks would meet the requirements. There are prescribed procedures per the National Historic Preservation Act Section 106 for determining deviations. For state and local Historic Landmarks, there are similar determinations to be made by the State Historic Preservation Officer or other delegated authority.

Per the ADAS, Minimal Requirements for accessibility in Historic Buildings are:

- a) A minimum of one accessible route from the site to an accessible entry.
- b) At least one accessible entry shall be provided. (If public entries cannot comply, then a non-public, unlocked entry may be provided, with directional signage provided at the public entries.)
- c) If toilets are provided, at least one toilet on an accessible route must be provided. (A unisex privacy restroom may be used.)
- d) An accessible route shall be provided to all public spaces at the accessible level of the entry.

Again, these minimal requirements may only be used by exception, when it is formally and properly determined that meeting the standard requirements for alterations to buildings cannot be done, in order to preserve the historic nature. It may be that only some aspects of the standards specifically cannot be met. Although we have been design sensitive in our recommendations, we have not coordinated with the preservation authorities. The Owner needs to take this step.

10. *E&A Recommended Solutions* – The solutions proposed in our survey are recommendations based upon survey observations and our experience, and do not reflect any design study. There maybe alternative compliant solutions. For some items we indicated “further design study required” where the solution requires detailed study, or where there is no obvious solution. In retrofits, accessibility must be provided to the maximum extent technically feasible. Solutions also do not take into account notable aesthetic

considerations which could modify or increase the cost of implementing the solution in an acceptable way.

11. *Locked Rooms* – Occasionally we may have encountered an area that was locked, and there was no one on site who could provide access. We assumed that most of these were storage areas, however, there could be some areas used by the public that were not assessed.
12. *Door Maneuvering Space* – In our report we use the term “level” for door maneuvering space, clear floor space, and ramps landings. In this context “level” means having a slope in all directions no more than 2% (1:48) per ADAS requirements, which is a slope of ¼” per foot. This is considered level per ADAS.
13. *Plumbing Fixture Counts* – E&A did not perform an analysis of plumbing Code requirements to determine if the minimum number of plumbing fixtures is provided in each room or space.
14. *Owner Items* - Some Recommendations indicate “Owner Items” and carry no cost for removal. Since the City maintains in-house forces that may be responsible for general building maintenance and small projects, it will be more cost efficient to have City staff address these relatively minor issues.
15. *Public Areas versus Staff Areas* – Only public areas were surveyed for purposes of identifying and correcting barriers as part of this survey. Staff work areas would be included as part of a reasonable accommodation per Title I of the ADA.
16. *Facility Plans* – When City of Bellevue provided plans of the facilities surveyed, the plans are included in a reduced format in the report.
17. *Vehicle Charging Stations* – There are currently no enforceable standards for charging stations. E&A recommends that where provided, an accessible route from the building entry be provided to the charging stations. This is to include a 60” access aisle on one side that will give access to the charger. E&A also recommends having the operable control within the required reach range. E&A cited the charging stations in the report where non-compliant per above recommendations.
18. *Specific Facility Assumptions* – Refer to below for specific assumptions.

Aquatic Center

- The Warm Spring Pool had been completely drained of water and the Blue Lagoon Pool had some of the water drained for the annual maintenance, so E&A was unable to check the water level accurately in relation to pool lift height.

Bellevue Botanical Gardens

- Accessible Parking* – At the request of the City, E&A did not survey the existing accessible parking, stairs, or routes from the parking as it will be revised with

forthcoming revisions to the Botanical Gardens Visitor Center and parking per Site Plan drawing dated 11-8-11 by Olson Kundig Architects

- *Lake to Lake Trail* – E&A did not survey the relocated trail that is to be re-routed around the new visitor center and parking per Site Plan drawing dated 11-8-11 by Olson Kundig Architects. E&A only surveyed the trail from the existing lower parking lot to Wilburton Hill Park and a small section on the north side of the gardens running parallel to the street.
- *Visitor Center* – E&A did not survey the Visitor Center kitchen as we were informed that it is a staff only kitchen. We also did not survey staff Room 106 per the plan.
- *Paths and Trails* – The outdoor recreation trail standards have yet to be adopted. Therefore there is no standard in place that covers these areas. E&A used its best judgment on which trails have the ability to be revised to be accessible and which others that would be technically infeasible due to excessive slopes and space. E&A did not survey trails as defined as mulch paths per the Trail and Accessibility Guide handout. E&A does however believe the main Tateuchi Loop Trail should be accessible to obtain the same experience as others. Any trails or paths that branch off of this trail that had the ability to be revised to comply, E&A recommend it.
- *Sharp's Cabin* – E&A did not survey the route to the Sharp's Cabin as the entire building is being relocated as part of the renovation.

Bellevue Golf Course

- E&A surveyed the golf course accessible route under the assumption that the allowed 48" golf car passage would be used to access all tees, greens, driving ranges and practice putting greens. This would be in lieu of providing a paved path throughout the golf course in order to provide accessible routes to all areas.

City Hall Interior

- E&A did not survey outside vendor equipment such as the coffee cart and its contents. E&A did however survey the seating as we assume the City provides the tables and chairs associated with the function. The Deli counter on Level 3 was surveyed as was the associated furniture.
- E&A assumed that all functions of the Development Review Department, including computer systems functions, could not be performed at the service counter that is behind the Service First Counter. If these services could be performed at this location an alternate solution exists from lowering one each of the counters. Verify.
- E&A assumes the top portion of the permanent room signage designations will not change. If the signage changes based upon various room functions, the existing signage complies.
- E&A based the meeting room seat counts upon the configuration in place at the time of the survey. Alternate configurations may require additional accessible seating locations from that stated in the report.
- Per on site staff, there are 10 wireless assistive listening devices available tethered to the audio system and 2 microphone headsets. E&A based our recommendation on assuming the wireless systems can be used in the meeting rooms as well as the

council chambers. Per the report E&A budgeted for hearing aid compatible systems only. E&A did not verify if existing listening systems are hearing aid compatible.

- E&A surveyed levels P3-P4 parking at the request of the City. The parking was initially beyond E&A's Phase II scope of work. These levels as we understand it have been converted from staff parking to public parking. Level P2 remains staff parking but E&A made comments as all levels of parking were needed to analyze required accessible parking. E&A did not survey the vehicle charging stations at this site.

Crossroads Community Park and Center

- *Community Center* - At both kitchens, E&A assumes that among the range of entities that are allowed to use the kitchen (e.g.: community center staff, catering companies, etc.) the public (e.g. community group members) are allowed to access and use the kitchen.

- *Community Center* - Storage areas, such as where extra tables, performance equipment, etc. are NOT accessed by the general public.

- *Community Center* - At the theatre area, the general public is allowed to move the accordion doors that subdivide the space into smaller rooms.

- *Community Center* - The coat area within the theatre is allowed to be accessed by the public, or a member of the general public is allowed to serve as the coat check staff for events where a coat check is used.

- *Community Center* - At the gym, E&A did NOT access the exit doors at the southeast side of the gym regarding their use as part of an accessible route into the gym, should these doors (directly flowing into the large patio at the south, main entrance) be held open for events.

- *Community Center* - The community center contains multiple exit doors with sidewalks leading to other sidewalks that lead to the park or other areas. E&A did NOT review these exit doors and their accompanying sidewalks. These doors and their accompanying sidewalks are not the primary entrance to the park, nor are they the primary entrances to the community center from the park (they are locked).

- *Community Center* - E&A is NOT an expert on the subject of fire and life safety matters found in the building code. E&A did NOT review existing exits within the building or analyze the existing egress within the building to determine if accessible means of egress (as scoped by the 2010 ADAS in section 207) had been provided.

- *Community Center* - The restroom located next to the children's classroom was assessed utilizing ADA standards for children's use (604.9, 606.2 exception 5 if applicable). From information received by the staff at the community center, there are two classes and age groups that use the facility;

- a. preschool class on Monday, Wednesday, & Friday, ages 4 and 5
- b. playschool class on Tuesday & Thursday, ages 3 and 4

- *Community Center* - The main entrance from the accessible parking is assumed to be the East entrance near the theatre and NOT the South entrance near the gym.

- *Community Center* - Per information received from community center staff, the second floor of the building is not available for access by the public. Stairs are located near the theatre.

- *Par 3 Course* - E&A surveyed the golf course accessible route under the assumption that the allowed 48" golf car passage would be used to access all tees, greens, driving

ranges and practice putting greens. This would be in lieu of providing a paved path throughout the golf course in order to provide accessible routes to these areas.

- *Entire Park Parking* – E&A surveyed each parking area separately and made our comments accordingly.
- *Crossroads International* – This refers to the “upper portion of the park from the skate bowl east.

Downtown Park

- E&A assumes the playground and children’s restroom are used by ADAS referenced children ages 2 to 12.
- The east entry to the park from the public way was not surveyed. It appears that a private property owner is in between the park boundary and public way.
- There were several art installations in the lawn areas. A subsequent trip to the park revealed they no longer exist. The report will include the art installations as configured at the time of the survey as a guide for future installations.

Kelsey Creek Farm

- The Farm Office was not surveyed as E&A was informed it is a staff only area.
- E&A did not survey the facility or accessible routes to the horse related arenas, trails or paths. According to the on-site staff we were informed that Kelsey Creek does not offer therapeutic equestrian training.
- E&A assumes the vehicular drive up to the Education Barn is intended for staff only. If the public is allowed to use this drive, accessible parking could potentially be placed at this upper level.

Northwest Art Center

- E&A was informed that all traffic that visits the Administration Building park at the main parking lot and enter the “rear” of the house. Therefore we did not survey the front parking or route to entry off the main highway.
- E&A assumes the low work tables are intended for children 12 or younger.
- E&A assumes the kitchen is used by the public for various functions.

Robinswood Park

- No assumptions.

Wilburton Hill Park

- E&A assumes the bleachers will seat up to 50 persons each, and based our calculation on this. If the bleachers seat more than 50 persons, additional accessible seating areas may be required.
- E&A did not survey the continuation of the Lake to Lake trail the runs beyond the playground and behind the baseball fields.

General Assumptions:

1. *Operations and Program Information* – E&A was provided limited general information concerning facility operations. The report was developed based

upon the Consultant's observations of existing conditions and programmatic information provided. E&A surveyed the properties based upon the current use of the facility, and based our solutions accordingly.

2. *ADAS Amendments* - The 2010 ADA Standards may be periodically amended by The Access Board and adopted by DOJ. The ADA Facility Survey and citations applied were based upon the ADAS standards currently *enforceable by USDOJ* at the time of conducting the field survey. Amendments issued in the Federal Register as adopted by the Department of Justice subsequent to the issuance of the report may affect future barrier removal plans.
3. *"Undue Burden" and Barrier Removal* – The Public Entity is solely responsible for determining when program accessibility does not cause an undue burden based upon the Owner's current finances. Generally, where the Consultant has made a recommendation to not remove a barrier at the present time, it is only if the cost appeared extremely high *and* only if minor increased accessibility would be achieved as a result of this removal. Such recommendations should be reviewed by the Owner over periods of time, as finances may change.
4. *Reasonable Accommodation to Employees* - Under the ADA Title I, staff areas of existing facilities need not be changed unless an employee with a disability requests a reasonable accommodation be provided. Note that actual accommodations required by an individual with a disability will depend upon their specific needs. Also note that if currently designated "staff" areas were changed into designated "public" areas in the future, it may require removing additional barriers to satisfy ADA requirements for public use.
5. *Building Code* - The current building code may be applicable when securing a building permit for renovations requiring such a permit. There may be some deviations from ADAS in dimensional requirements for accessibility, which should be verified prior to construction. We have attempted to take these into account in our recommended solutions.
6. *Code Required Accessibility Expenditures* - Alteration projects completely distinct from an ADA project may trigger the Code "percentage of cost for path of travel compliance" rules. These regulations require that a portion of the total money spent on renovation be spent to improve the accessibility of the building. Therefore, it would be prudent to evaluate the long-term facility uses and renovation plans prior to implementing ADA barrier removal in order to perform work most cost effectively.
7. *No Testing of Hidden Conditions or Alarms* - Barrier removal solutions were based upon field observations of existing conditions. No testing, review of construction documents, or review of building codes was undertaken as part of this ADA Facility Survey. For example, grab bar reinforcing within walls was not verified by E&A to be present, or tested by the E&A to assure that the reinforcing meets the required loads for safety. E&A did no testing of alarm systems for compliance with technical standards in ADAAG.
8. *An Important Note* - The Americans with Disabilities Act is a complex law. It contains many concepts and terms which have not been tested by actual

experience or defined in the courts with respect to particular factual situations. Accordingly, E&A makes no claim, expressed or implied, that, in preparing this ADA Facility Survey, all possible barriers (to all individuals with disabilities) have been identified whose removal might be required by the ADA.

9. *Fixtures, Furniture and Equipment* - Estimated costs are budgetary only and do not include moveable fixtures, furniture and equipment (FF&E), unless specifically noted in the Matrix.
10. *Preliminary Solutions* - Some recommended solutions are very preliminary in nature and require more detailed design study and code verification to confirm feasibility and costs. The solutions are intended to provide scoping for a designer to provide construction documents for implementation.
11. *Owner Items* - Some Recommendations indicate "Owner Items" and carry no cost for removal. Since the City maintains in-house forces that may be responsible for general building maintenance and small projects, it will be more cost efficient to have City staff address these relatively minor issues.

The Owner is solely responsible for non-discrimination under the ADA and other applicable laws, and civil lawsuits under the ADA (frivolous or otherwise) remain possible regardless of the number or types of barriers, if any, that are removed.

E&A's recommendations should be reviewed by the Owner's legal counsel and risk management and compliance personnel. The modification work required to comply with the ADA varies according to many factors among which are the financial resources of the Owner and significance/ severity of the barriers. The Owner's decisions regarding the scope of work to perform should be based upon the professional advice of the noted parties, along with input from the disabled community or representatives, whenever possible.

Technical Assumptions:

1. *Mounting Heights at Dispensers* – Note that State of Washington Amendments (WAC 51-50) to the 2009 International Building Code and referenced 2003 ANSI A117.1 technical standards, per section 1101.2.5 requires that maximum mounting height for new dispensers (for example, dispensers located within restrooms) be maximum *40" high*. This is more stringent than the current ADAS requirements of maximum 48" high with a 30" x 48" clear floor space for a front or parallel approach. We recommend that all new dispensers and/or relocated dispensers should meet this more stringent Code reach range requirement.
2. *Slip Resistance* - ADAS Section 302 require that both floors on accessible routes and floors within accessible room areas are to be "slip-resistant". While OSHA has considered a Static Coefficient of Friction of 0.5 to be "slip-resistant", the Access Board *recommends* a coefficient of 0.6. Ramps require a higher "slip- resistance" of 0.8.

There is more than one testing methodology, and the results of the different tests are not interchangeable. Tests are for dry surfaces, and do not take into

account wet surfaces.

The Owner should be aware that some VCT (vinyl composition tile) and sheet vinyl floors commonly used may not have Coefficients of 0.6; therefore, would not be considered slip-resistant under the new standard. Generally, stone, tile, wood and vinyl floors with specified “polished” finishes are likely to not meet the ‘slip-resistant’ coefficient. Polishes and contaminants further exacerbate the situation, suggesting a maintenance program. Floors in wet areas, such as hotel guestroom bathrooms are made more slippery by water and soaps. E&A recommend that detailed product information be reviewed for new installations to assure compliance. More discussion is available from the Access Board in a Technical Bulletin (available online at www.access-board.gov).

Your cleaning and maintenance program should be reviewed in the context of slip resistance.

Floors and surfaces were neither tested nor specifically cited in the ADA Facility Survey Reports as this testing is not included in the E&A’ scope of work, nor is it our technical expertise.

3. *Dimensional Tolerances* – Section 104.1.1 of ADAS states that all dimensions are subject to conventional building industry tolerances for field conditions EXCEPT where requirement is stated as a range with specific minimum and maximum end points. Although many studies have been performed to determine what acceptable dimensional tolerances are, there are relatively few widely accepted tolerances. It should be noted that in the case of new construction, design documents can often lead to dimensions that exceed ADAS maximums and minimums, such as a ramp that is designed with a 1:12 slope. The contractor may construct the ramp with a slight field tolerance which results in a ramp that slightly exceeds the 1:12 slope, which is actually the maximum slope allowed by ADAS, not a desired slope. Therefore, design documents should specify maximums and minimums where applicable and also allow for field tolerances.

For the purpose of this Survey Report, in general we did not cite existing field conditions within 1/4” of those specified in ADAS, if it can be assumed that the dimensional discrepancy will not result in any significant decrease in accessibility. Examples would be grab bars mounted at 33-1/4” above the floor (where 33” is the required height) or a ramp handrail with a 1-3/4” diameter (where 1-1/2” diameter is the maximum allowed). Similarly we allowed a tolerance of 1/4” with toilet dimensions to side walls.

4. *Door Closers* – ADAS does not have a requirement for opening pressure for exterior hinged doors. It has been our experience that existing door closers can only be adjusted to within approximately 3 pounds of their current operating force. Accordingly, we may recommend replacement of door closers, as opposed to simple adjustment, where the opening pressure exceeds 8 pounds. Although the ADA does not contain a requirement for exterior doors, it has been our experience that this Building Code requirement is extremely necessary for many individuals to enter a building.

C. BUDGET COST ASSUMPTIONS

The budget costs included in the ADA Survey Results Matrix are concept level cost estimates that are provided only to assist the Owner with establishing budgets to remove physical barriers in public accommodation areas, subject to the assumptions in this Executive Summary.

*The costs in the Survey Report are **budget** costs, not an estimate of probable cost, subject to the following conditions:*

Budget costs INCLUDE:

- Costs for direct material, labor and equipment costs, without general contractor mark-ups for overhead and profit, General Conditions, or sales tax.
- Costs are based upon costs typical for the region of the facility at the time of survey. Please refer to indexes such as the Means Construction Index to reflect changing costs over time.
- Costs based upon typical costs for labor and materials for each item, given moderate quantities for typical construction types.

Budget costs DO NOT INCLUDE the following:

Therefore, the following are some specific budget items the Owner should consider in project budgeting, in addition to the costs summarized in this report:

- General Contractor overhead and profit and / General Conditions.
- Construction Management, if used.
- Design and project management fees.
- Inflation factors when phasing construction over time.
- Contingency for unforeseen existing conditions.
- Premiums due to construction in occupied and heavily used spaces.
- Premium for any potential overactive bid climate and potential high volatility and unpredictability reported for certain materials such as lumber and steel.
- Potential asbestos abatement, lead paint abatement, or other environmental impact costs that may arise doing accessibility renovation work.
- Alternate costs that may be included in the comment field, not in the budget cost field.
- High levels of fit, finish and detail that may be desired on an aesthetic basis.
- Contingency due to future changes in the accessibility laws/ codes.
- Permit fees.
- Sales tax.
- Any in-house costs allocated to projects.

D. Removing Barriers to Programs - Using This ADA Survey Report

It is important to understand that the ADA Master Survey Report represents preliminary solutions and costs for physical facility modifications to remove barriers, as if the building were to be constructed to new compliant standards, and that it is NOT automatically necessary to remove barriers to programs by making all these expenditures. There are also some limitations due to structural or technical infeasibility (as specifically defined in the law).

As outlined above in the requirements for Public Sector entities under Title II of the ADA, there are many ways to remove barriers to the City's programs, and that program accessibility include far more than the facility survey that is E&A scope of work under our contract.

Part of the City's programs include telephone services and written information at each department. This type of program access is not part of this report.

To implement the survey information in this report, there are some important concepts.

- The ADA requires that public entities perform a "Self Assessment" and a "Transition Plan" (implementation plan). The Self Assessment is the list of barriers. Because E&A survey reports include recommended solutions and itemized costs, the detailed portion of a Transition Plan is completed. The missing piece is the overview planning and prioritization, and matching the needs to annual budgets. It is the City's responsibility to perform this part of the Transition Plan. E&A can assist the City as an additional hourly consulting service. We have successfully used a facilitation approach with other entities with a work session of stakeholders.
- This report provides physical facility solution to remove barriers, and such solutions are enduring solutions.
- There may be other methods to remove barriers in a compliant fashion which may be found as a result of further design study. Our recommendations are preliminary, based upon observed conditions and our experience, and were NOT based upon any design work.
- The City may use operational solutions such as relocating a program to a fully accessible facility from a non-accessible facility.
- Equivalent facilitation, such as providing the service in a different way under the ADA is permitted. However, operationally dependent solutions require clear written policies, ongoing monitoring, training of staff, and usually cannot be depended upon to work on a long term basis.

Alterations

Per Section 202 in the ADA Standards for Accessible Design, there are some aspects worth highlighting.

- No alteration shall be undertaken which decreases or has the effect of decreasing accessibility or usability of a building or facility below the requirements for new construction at the time of alteration.
- Where compliance is "technically infeasible" alterations should provide accessibility to the maximum extent feasible. (Technically infeasible means having little likelihood of being accomplished because existing structural conditions would require removing or altering a load bearing member which is an essential part of the structural frame, OR because existing physical or site constraints prohibit modification or additions for full compliance.
- Elevators do not need to be added to an existing facility of less than 3 stories or of less than 3000 s.f. per story except with respect to any facility that houses a shopping center, a shopping mall, the professional office of a health care provider, a terminal, depot, or other station used for specified public transportation, or an airport passenger terminal.. This does not eliminate the need to comply with other aspects of facility accessibility. It also does not eliminate the need to provide access to the City programs in another fashion.

- Alterations to primary functions must be done so as to ensure to the *maximum extent feasible* that restrooms, telephones, and drinking fountains serving the area are usable unless such alterations are disproportionate to the overall alteration in terms of scope and cost as determined by criteria by the Attorney General.

IV. EXECUTIVE ACCESSIBILITY SUMMARY

Phases II- ADA Surveys – Public Spaces

E&A was contracted to perform an ADA Facility Accessibility Survey of public areas of the ten City owned facilities to assess observed barriers under Title II of the ADA using the 2010 ADA Standards (ADAS) currently enforceable by the US Dept. of Justice as a technical standard. A review of accessibility issues per applicable Building Code was NOT part of our scope of work. Review of accessibility within staff only areas was NOT part of our scope of work. However, our proposed preliminary solutions do attempt to take into account some more stringent Building Code dimensional requirements, where clearly applicable.

Under the ADA, the public entities need to remove barriers to programs to the extent that it is “does not cause an undue burden” over time. All new construction after January 26, 1993 should have been constructed in compliance with 1991 Standards (1994 ADAAG). Please reference essential Assumptions in Section III - B above.

As previously stated, the ADA Master Survey Report represents preliminary solutions and costs for physical facility modifications to remove barriers, as if the building were to be constructed to new compliant standards, and that it is NOT automatically necessary to remove barriers to programs by making all of these expenditures.

The total cost to remove all barriers to the ten Phase II facilities using facility modifications per the detailed reports is: \$1,854,351, subject to all the budget assumptions above. Again, this is not what it is likely to cost for full barrier removal if other operational solutions are applied where possible.

Some items that have the “general appearance or symbols of accessibility” are not compliant with the ADA standards.

Administrative spaces were viewed from the perspective of the limited areas that the public can use unaccompanied by staff. These areas are often essential interface points for public service.

Where appropriate, the City may relocate and reschedule programs to alternate accessible locations, or rethink how some services are provided. The completion of a Transition Plan must match the findings to annual budgets, and prepare an overall strategy for removal of barriers to programs.

We have based our recommendations utilizing somewhat limited input from representatives on site and the City’s published information, which may not be a complete understanding of the operation. Again the City’s judgment needs to be applied during implementation.

It should be noted that there is virtually no such thing as a perfectly compliant new building, and we did find some issues in the newest City buildings.

Finally, we recommend that the appropriate people in the Departments take some time to digest the wealth of detail to understand the large picture of their operations and facility issues. The standards are not simple, and implementing barrier removal should be a considered action.

E&A is providing the survey data in electronic format, with client access to our web based custom ADA Survey Solutions™ Software, for the City to use in managing the process.

Endelman & Associates PLLC has been pleased to work with the City, and will remain available to work with you as your future needs may require.

Brief Overview of Findings

The following are “snapshots” of the significant issues and extent of non-compliance in the surveyed facilities. These are not intended to be complete summaries. Please see the ADA Master Survey Reports for each facility.

Aquatic Center

The newer portion of the Aquatic Center, Warm Spring Pool and the showers and locker rooms associated with it, have many features that either meet the accessibility requirements or can be made to comply without structural changes. The older portion, Blue Lagoon Pool and the showers and locker rooms associated with it, have features that are not available at the Warm Spring Pool (diving board, water slide, bleacher seats), but has many more issues in terms of accessibility. Some upgrades to the shower area, restrooms, and locker rooms can improve overall usability a great deal.

Bellevue Botanical Gardens

As requested, the parking areas and routes from the parking were not surveyed due to extensive forthcoming remodel of these areas. The Botanical Gardens visitors center has several issues. The restrooms have non-compliant fixtures, dispensers and grab bars. There are areas that lack a 36” accessible route such as the gift shop area and the computer workstation area. All of the trails within the Botanical Gardens have the gravel surface that is not stable, firm or slip resistant. The route throughout the gardens have many areas that exceed ramp slope, exceed cross slope and have areas that would be considered ramps, but lack handrails and level landings as required. E&A considered the Tateuchi Trail the primary trail that runs through the gardens. We recommend this trail as the main accessible route through the Gardens. There are other trails where the terrain would prohibit an accessible route. There are also mulch type trails that are too steep and narrow due to natural terrain for which we did not survey (trails were beyond our scope of work). For some of these areas we recommend providing an accessible model of golf car in order to access some areas such as the suspension bridge. The Lake to Lake trail to Wilburton Hill Park has slopes that exceed 5%, which are ramps and there are no handrails or landings. There are areas with cross slopes that exceed 2%.

Bellevue Golf Course

The accessible parking lacks the required number of accessible stalls and has slope issues. The route to the clubhouse is too steep and lacks compliant landings. There is no route to the public way. The clubhouse pro shop lacks a 36” route throughout. The clubhouse men’s restroom accessible stall lacks the required width, and the men’s and women’s restrooms lack compliant grab bars. The golf course restrooms have several issues ranging from door thresholds, accessible route issues and non-compliant fixtures. The golf course lacks an accessible route throughout the course. E&A is recommending using the golf car passage as the accessible route. There are only two holes that do not have a golf car passage to the tee

box due to a concrete curb. The driving range lacks the required 48" golf car passage to the teeing station for each of the areas including the upper range and lower instructors area. The upper range structure is a protruding object with the radial roof beams.

City Hall Interior

The interior of City Hall for the most part was designed and constructed to be accessible. There are however some areas that are not compliant. The Service First counter and the Development Services / Permit counters do not have a 36" wide x 36" high lowered section of countertop. There are room guides, brochures and informational handouts that exceed reach ranges per the 1991 Standard of 54". The elevator core women's restrooms lack compliant door maneuvering space on the interior. There are other issues within the restrooms including non-compliant fixtures, grab bars, and mirrors. The council chambers room lacks the required accessible wheelchair spaces and aisle seats. The meeting rooms and training rooms use a table which lacks 27" knee space. The garage accessible parking on the recently opened public parking on levels P3 and P4 have slopes that exceed 2%.

Crossroads Community Park and Center

Crossroads Community Park

The upper section of the Crossroads International Park had parking that had slope issues and curb ramps that were too steep. The walkways throughout the park had cross slope and running slope issues. The picnic tables lack the required knee space. The playgrounds at each of the upper and lower areas had mostly accessible equipment, but most lacked accessible routes due to the surface material. The drinking fountains typically lacked a "hi-lo" to accommodate standing persons. The route to the lower area of the park near the community center has slopes that are ramp slope and exceed ramp slope with no handrails or landings top or bottom.

Crossroads Community Center

The parking area lacked a sufficient number of accessible stalls. The existing accessible stalls were inaccessible due to slope issues within the stall and the access aisle. The walkway from the community center to the public way at the south side of the site lacks an accessible route due to non-compliant cross slopes (exceeding 2%) at various locations along the sidewalk. The Men's and Women's main restrooms contain non-compliant plumbing fixtures that include accessible lavatories at non-compliant heights, accessible toilet stalls that lack the minimum required width, and an accessible urinal at a non-compliant height. A number of interior doors with closers required an opening force that exceeded the maximum allowed (5 pounds). The height of lower electrical outlets at several rooms was less than the minimum required to the centerline of the lower socket of the outlet (15" minimum).

Crossroads Par 3

The Par 3 course parking lacked an access aisle that extended the full depth of the stall and has non-compliant slopes. The curb ramps are too steep. The entry door into the pro shop has maneuvering space that is too steep. The service counters are too high and there is no interior route to the restrooms due to stairs. The interior doors into the restrooms lack 32" clear. The restrooms' accessible stalls lack the required clear width, among other issues. The practice green and driving range lack an accessible route as does the golf course in general. This course has no golf cars, but E&A recommends providing an accessible model golf car in order to use the golf car passage route in lieu of providing accessible routes throughout the entire golf course.

Downtown Park

Downtown Park has three parking areas. Each of the areas has slopes and cross slopes that exceed 2% and the SE lot lacks the quantity required. The curb ramps are too steep. The main gravel path around the park lacks a firm and stable surface. It is basically level but has areas of undulations which create cross slopes to exceed 2%. The ramp up to the Belvedere is ramp slope and there are no handrails or level landings at each 30" rise. There are art installations that do not have an accessible route. The restrooms have non-compliant fixtures, grab bars and dispensers. The playground equipment lacks a compliant accessible route to each of the ground related components and to the elevated components. There are picnic tables that lack accessible routes and do not provide knee space.

Kelsey Creek Farm

Kelsey Creek has many challenges from an accessibility point of view due to its history as a farm. The only accessible parking is located near the property entry which is an excessive distance to the upper park features. The route from the parking to the playground has ramp slopes on each side of the bridge. There is no accessible parking at the upper gravel parking lot. The gravel path from the upper to lower portion of the park lacks a stable and firm surface, has cross slopes that exceed 2% and ramp slopes with no level landings or handrails. The route to the public way is ramp slope that lacks handrails and landings. There are picnic tables that lack an accessible route. The playground restrooms have non-compliant fixtures, toilet clear floor space, grab bars and lavatories. The playground lacks an accessible route to the ground level components. The upper amenity areas lack a compliant accessible route due to the gravel surface. This also includes slope, cross slope and width issues to some animal display areas. The day care facility is located in a converted 2 story house. The entry ramp lacks a compliant landing and the door maneuvering space exceeds 2%. The classroom doors are too narrow. The bathroom, upper and lower, has non-compliant fixtures and clear floor space. There is no accessible route to the lower part of the house. The Education Barn has level changes with no ramp or non-compliant ramps. There is an amphitheater that lacks wheelchair seating and an accessible route to the stage.

Northwest Arts Center

The Northwest Arts Center building has several exterior route issues. There is not a compliant accessible route to the public way due to excessive slopes. The accessible parking lacks a van stall and has slopes in excess of 2%. The walkway to the building entry from parking has ramp slopes but no handrails or level landings. There are site amenities such as picnic tables at the lawn area that lack accessible routes. The restrooms accessible stalls are too small and have other non-compliant fixtures. The classrooms are for the most part accessible but have non-compliant amenities such as sinks and work tables. The auditorium has a non-compliant door threshold and the columns are protruding objects.

Robinswood Community Park

Robinswood Community Park has many routes, especially east-west direction, with slopes greater than 5% maximum. Ramps are required to make these routes fully accessible. The athletic fields on the north and the playgrounds have many accessible features, with minor issues. The pond in the middle of the park is a nice feature, but currently is not accessible. It appears that providing an accessible route to the pond is feasible, whereas the trails at the south end of the park are not likely to be easily made accessible.

Robinswood House

One of the main issues at the Robinswood House is the lack of accessible routes. The house itself sits on a sloped site, so currently no compliant accessible route exists to get to and from the house from the parking lot or the public street. There is no accessible route to the second floor of the house, used for conferences or as bride's and groom's rooms for weddings. Attempts at improving accommodations seem to have been made with the relatively new accessible toilets outside, in the courtyard.

Teen Barn

Much of the non-compliance at the Teen Barn is with the restrooms. Both restrooms are substantially non-compliant. A more defined compliant loading zone may be necessary; many parents currently use the fire lane at the round-about as loading zone. The nearest parking lot for the Teen Barn is near the Robinswood House and currently not on an accessible route.

Tennis Center

The main entrance of the Tennis Center is not on an accessible route. The routes to the tennis courts once inside the Tennis Center have slopes exceeding 8.33% maximum with no door maneuvering clearances on the court-side. The restrooms and locker rooms have many non-compliant features; the showers are currently not accessible as the route to the shower area has a step-over type threshold.

Wilburton Hill Park

The route to the public way is a gravel surface that has ramp slopes that lack handrails and level landings. The accessible parking slopes exceed 2% at the ball field and playground parking. The walkway up to the ball fields has ramp slopes that lack handrails and level landings. The restrooms have a few issues with lavatories that are mounted too low and mirrors that are too high. There are no drinking fountains for standing persons in the ball field area. The bleachers lack the designation at the end of the row for an accessible companion seat. The playground lacks an accessible route to the ground level components due to surface material and slope. The upper level play equipment is substantially non-compliant. The route to the soccer field is a gravel surface, and has ramp slopes.

Please see the ADA Master Survey Reports for details of these and other items not discussed above. Total budget cost to address all the issues as defined, subject to assumptions herein, is included at the end of the ADA Survey Report.

Please call me you require any clarifications on our report.

Respectfully submitted,



William E. Endelman, AIA, Principal
Endelman & Associates PLLC

BellevuePhII-ExecSum

APPENDIX

Included in the Appendix are the following items:

A. Abbreviations

B. Legend for the ADA Survey Results Report

APPENDIX A - ABBREVIATIONS

General: These are common abbreviations that may be used in the Report.

@	At	LF	Lineal Feet
AC	Asphalt Paving	LL	Lower Level
ACCESS	Accessible	LBS	Pounds Force
ADA	Americans with Disabilities Act	LS (or LSsum)	Lump Sum
ADAAG	ADA Accessibility Guidelines	MAX	Maximum
		MIN	Minimum
ADAS	The ADA Standards for Accessible Design	MEZZ	Mezzanine
		N	North
AFF	Above Finished Floor	PH	Phone
AMBU	Ambulatory Stall	P	Public
ANSI	American National Standards Institute, Inc.	POS	Point of Sale
		PR	Priority
APPROX	Approximately	PUB	Public
BBQ	Barbecue	RM	Room
BLDG	Building	RR	Restroom
BSMT	Basement	S	South
COMM'L	Commercial	S	Staff
CONC	Concrete	SF	Square Feet
CONF	Conference	SAN NAPKIN	Sanitary Napkin
CORR	Corridor	STR	Stair
CT	Court (Tennis, etc.)	T	Toilet
E	East	TYP	Typical
EA	Each	W	West
ELEV	Elevator	WAC (51-50)	Washington Administrative Code Amendments to 2003 IBC
EXT	Exterior		
FLR or FL	Floor		
INT	Interior	WF	Water Fountain
LEV	Level		

Appendix B. LEGEND for the ADA Survey Results Report (Matrix)

This Legend is essential to assist in for properly interpreting the recommendations for facility accessibility solutions to program barriers in the report.

Building ID (Client): The facility location may be followed by an ID# using any Client provided numbers.

Barrier (#xx): This item describes the observed barrier (or potential barrier) to the disabled. (Numbers are used for report cross referencing use only.)

ADA Citation: This item identifies the section of the 2010 ADA Standards (ADAS) referenced for each Barrier. The Citations are per ADAAG as enforced by the U.S. Dept. of Justice current at the completion of the field ADA Facility Survey.

Location: This is the area where the barrier was observed. Where appropriate, items may be grouped and shown with multiple quantities. The first number shown is the floor(s) number. The second number identifies Suite number(s) as appropriate.

Recommendation (Proposed Solution): This column describes the solution proposed to remove or reduce the potential barrier identified, compliant with the 2010 ADA Standards, current at the time of the Phase II survey. Often there may be alternate solutions. Some solutions may require further design study.

PR (ADA Guidance Priority): For general guidance only, the recommended solution is given an ADA General Priority Coding of 1, 2, 3, or 4. These codes correspond to the barrier removal categories provided for general guidance in the *Regulation on Nondiscrimination on the Basis of Disability by Public Accommodations and in Commercial Facilities* (reference 28 CFR Part 36.304(c)). E&A believes that they are appropriate for guidance to public entities per Title II. Upon completion of the Survey, the City should establish implementation priorities in detail based upon criteria such as the law, operational needs, funding and long range planning.

- 1 Provision of access to a place of public accommodation from public sidewalks, parking, or public transportation. These measures include installing entrance ramps, widening entrances, and providing accessible parking spaces/ signage.
- 2 Provision of access to those places where goods and services are made available. These measures include revising interior routes, adjusting the layout of tables, providing Braille and raised character building signage, widening interior doors, and installing ramps.
- 3 Provision of accessible restrooms, such as removal of obstructing items on the route to the restroom, widening of restroom doors, widening of toilet stalls, provision of accessible plumbing fixtures, and installation of grab bars.
- 4 Making other modifications to provide access to the goods, services, facilities, privileges, advantages, or accommodations, such as accessible public phones and water fountains.

Comments: This column is used to clarify the ADAS requirement or further clarify the Recommendation shown.

Recommendation (Proposed Solution): This column describes the solution proposed to remove or reduce the potential barrier identified, compliant with ADAS standards current at the time of survey. Often there may be alternate solutions. Some solutions may require further design study.

Code: Each recommended solution is given a compliance sufficiency code, numbered from 1 to 5. The Sufficiency Code is to further qualify the level of compliance achieved by, or other major aspect of the recommended solution. The meanings are as follows:

- 1 When the proposed solution is implemented, this barrier will be removed, and will be, in our opinion, in compliance with the requirements of the Americans with Disabilities Act's current ADA Accessibility Guidelines.
- 2 Complete compliance with the requirements of the ADA will not be provided. It is either "technically infeasible", or (for the Public Sector), the solution would appear to be "an undue burden" per ADA standards for Public entities. Therefore, the Consultants have recommended that no changes be made at this time. Strict adherence with the ADAAG standards would in our opinion carry an unreasonable cost (to be solely determined by the Owner) or be technically infeasible. In enforcement, the USDOJ would take into account the Owner's financial capability among other ADA criteria.
- 3 The solution appears to be the responsibility of another entity such as a Tenant, who we recommend be notified of the barrier.
- 4 The condition identified technically does not meet the requirements of ADAAG. However, in our professional opinion, the deviation is minor enough or within construction tolerances that correction of it would not likely significantly increase the degree of accessibility of the condition. For that reason, no modification beyond what is described in the *Recommendation* column is proposed, but sufficiency is not indicated as fully compliant.
- 5 Because complete compliance appears to be technically infeasible or extremely difficult due to the existing building configuration, the proposed alternative means (or policy implementation) has been proposed. While this recommended solution provides less than complete physical compliance, it may constitute a reasonable course of action for this situation that improves the condition.
- 6 E&A recommends considering delay in implementing a specific item pending resolution and adoption of the "New ADAAG" which may make the current condition compliant.
- 7 The subject item is not accessible, but is not required to be based upon an exemption in the law. It may, however, be a program issue that requires some action.

Comments: This column is used to clarify the ADAAG requirement or further clarify the Recommendation shown.

TYPE (S/P): This column provides an indication of the area in which the barrier was observed. E&A's scope of work is solely public accommodation areas, **S** indicates that it is in a **Staff** area; **P** indicates a **Public Accommodation** area, and therefore subject to Title II. Under Title I, Work in a staff area would not technically required to be performed until a person with a disability employed in this area requires reasonable accommodation, except for provision of an accessible route to staff areas.

PRI (ADA Guidance Priority): For general guidance only, the recommended solution is given an ADA General Priority Coding of 1, 2, 3, or 4. These codes correspond to the barrier removal categories provided for general guidance for public accommodations in the *Regulation on Nondiscrimination on the Basis of Disability by Public Accommodations and in Commercial Facilities* (reference 28 CFR Part 36.304(c)). Upon completion of the Survey, the Owner may establish implementation priorities in detail based upon criteria such as the law, operational needs, funding and long range planning.

- 1 Provision of access to a place of public accommodation from public sidewalks, parking, or public transportation. These measures include installing entrance ramps, widening entrances, and providing accessible parking spaces/ signage.
- 2 Provision of access to those places where goods and services are made available. These measures include revising interior routes, adjusting the layout of tables, providing Braille and raised character building signage, widening interior doors, and installing ramps.

- 3 Provision of accessible restrooms, such as removal of obstructing items on the route to the restroom, widening of restroom doors, widening of toilet stalls, provision of accessible plumbing fixtures, and installation of grab bars.
- 4 Making other modifications to provide access to the goods, services, facilities, privileges, advantages, or accommodations, such as accessible public phones and water fountains.

Qty / Units: The quantity includes the unit of measure applicable to the Recommended Solution, and to the Budget Cost immediately following.

Budget (Budget Cost): This column provides a budgetary opinion of approximate construction cost per item, based only upon descriptive scope, not a completed design. This is not a cost estimate. Design fees, management costs, sales tax, internal costs and General Contractor overhead and profit, escalation, and other items are not included in these figures. Allowances are shown when further design study is required. *All costs for implementation are not included in these costs. Therefore, please see Budget Cost Assumptions section and Facility Assumptions section in the Report for details.*



City of Bellevue

ADA Facility Accessibility Survey – Phase III



City of Bellevue
450 110th Avenue NE
Bellevue, WA 98004
Attn. Ms. Jennifer Mechem

Submitted on February 16, 2016

Endelman & Associates PLLC

Accessibility Consulting ■ ADA – FHA Compliance

William E. Endelman, AIA ■ Michael B. Schneider, AIA - Principals

Endelman & Associates PLLC

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William E. Endelman, AIA ■ Michael B. Schneider, AIA - Principals

February 16, 2016

Ms. Jennifer Mechem,
ADA/Title VI Civil Rights Program Administrator
City of Bellevue
450 110th Ave. NE
Bellevue, WA 98004

VIA E-Mail: JMechem@bellevuewa.gov

Re: City of Bellevue Phase III Buildings ADA Survey
E&A Project #12.347.1

Dear Ms. Mechem:

Endelman & Associates PLLC is pleased to present this ADA Facility Survey Report (Phase III) of 2 City-owned facilities. We trust you will find the report thorough and useful for your efforts to remove barriers to accessibility. Along with the hard copy report, we have provided password access to the new Survey Solutions database software. The web database will help you manage the survey data over time as barriers are removed, export data to Excel spreadsheets, and print reports.

Each facility report is in a separate tabbed section, which includes the ADA Survey Results Matrix and captioned photo pages of representative conditions.

The Overview / Executive Summary explains the survey context and how to use the report. This leads to an important recommendation – E&A recommends that anyone receiving a copy of any portion of the report data be provided the Overview / Executive Summary Section. This section answers many questions, and helps ensure that the data is used properly.

It has been my pleasure working with you and the City's team, and we will be glad to provide you with any clarifications you require regarding the content in our report.

Sincerely,



Bart Sanderson, Senior Consultant
Endelman & Associates PLLC

BellevuePHIII-CvrLtr

City of Bellevue - Phases III- ADA Surveys – Public Spaces PHASE III ADA FACILITY SURVEY REPORT

Prepared by: Endelman & Associates PLLC – February 16, 2016

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Section 2 - APPENDIX / LEGEND

- A. Abbreviations
- B. Legend for the ADA Survey Results

Section 3 - Captioned Photo Pages

- A. South Bellevue Community Center
- B. Mercer Slough Environmental Education Center

Sections 4 - ADA SURVEY RESULTS - For each of the following facilities, a Detailed Matrix of observed issues, and captioned photo pages.

1. South Bellevue Community Center - Immediate Site and Facility
2. Mercer Slough Environmental Education Center - Immediate Site and Facility

BellevuePhIIIExecSum.docx

City of Bellevue - Phases III- ADA Surveys – Public Spaces PHASE III ADA FACILITY SURVEY REPORT

Prepared by: Endelman & Associates PLLC – February 16, 2016

I. OVERVIEW / SCOPE OF SERVICES

City of Bellevue contracted with Endelman & Associates PLLC (E&A herein), to perform Phase III of an Americans with Disabilities Act (ADA) Survey of public areas of 2 City owned facilities in Bellevue, Washington. This list represents Phase III of the ADA Surveys, City selected facilities offering City programs. E&A had previously performed a Phase I and Phase II ADA Survey of 14 selected facilities in 2008 and 2012. We understand that it is the City's intention to complete remaining City owned facility surveys in additional Phases. This ADA Facility Survey is an effort to identify observed barriers to program accessibility in the public areas of existing City facilities for compliance with the "program accessibility" requirements of Title II of the ADA.

It is important to understand that the facilities are one component of City program accessibility, and E&A's scope of work is limited to facility access only. Additionally, there may be many available programmatic solutions for facility access, such as relocating programs to alternate accessible locations. However, the focus of this report is on removing physical barrier at each facility in order to provide enduring program access.

This ADA Facility Survey was performed to assess observed barriers under the ADA located in public areas of the facilities. Employee-only (or staff areas) were not assessed or part of E&A's scope of work, with some minor exceptions. Specifically excluded are assessments of staff-only (employee) areas where the public is not given self-directed access. Under Title I of the ADA, the City must make "reasonable accommodation" to employees with disabilities. However, staff-only areas are beyond E&A's scope of work.

E&A is also providing preliminary "Recommended Solutions" to remove each barrier, along with itemized budget costs. Title II of the ADA requires Owners to remove barriers to programs over time to the extent that it is "does not cause an undue burden". In this report, the "Owner" refers to the City.

This Report does not evaluate whether the facility was constructed in full compliance with the applicable Building Code accessibility provisions in force at the time of the original permit, or during any subsequent renovations. Note that Building Code accessibility compliance is not enforced retroactively. However, ADA compliance is retroactive and is a Civil Rights Law that presents the biggest exposure from a risk management perspective. It is important to note that in obtaining a building permit for any areas to be renovated for ADA compliance, there may be some more stringent dimensional aspects under the current building Code that would also apply.

Endelman & Associates PLLC

Accessibility Consulting ■ ADA – FHA Compliance

William E. Endelman, AIA ■ Michael B. Schneider, AIA - Principals

This survey does not address “auxiliary aids” or operational issues ensuring that people with disabilities are not denied equivalent services, such as provision of interpreters or Braille printed material.

The field ADA Facility Surveys for the properties were conducted using proven ADA Survey instruments and calibrated measurement tools. Collected data was reviewed and analyzed, and recommended preliminary solutions were developed to result in the ADA Facility Survey Report. We used Endelman & Associates PLLC’s custom Survey Solutions™ Software database to generate the ADA Survey Results section. The field ADA Surveys were performed in January 2016.

Each item in the ADA Survey Results for each building, that follows this Overview & Executive Summary, includes the *2010 ADA Standards for Accessible Design Citation (ADAS)*, the *Observed Barrier, Location, General Priority (PR)*, a *“Sufficiency” Code*, and a *Comments* field per item. (Please see “Survey Legend” in Appendix B for definitions.)

The Report includes captioned photographs of typical or unique conditions.

ADA Survey Standard

This survey is an assessment to determine compliance with the Americans with Disabilities Act (ADA) using a “safe harbor” technical standard. The 2010 ADA Standards for Accessible Design (and Regulations under 28 CFR Part 36) were adopted 9/15/10 to replace the original 1991 ADA Standards for Accessible Design (with its ADA Accessibility Guidelines [ADAAG] Appendix section revision dated July 1, 1994). Under Title III, there was an 18 month “grace period” which has expired, during which the 1991 Standards or the 2010 ADA Standards (ADAS) may be used. A single standard must be selected in its entirety for ADA compliance of all elements of a building, and “cherry picking portions of each is not permitted. The Phase III project was surveyed using the new 2010 ADAS in full force effective March 15, 2012.

All facilities built after January 23, 1993 should have been constructed in full compliance with the ADA per the 1991 Standards. Facilities predating this date should have their programs made accessible to the extent “it is not an undue burden”.

The new regulations offer a “safe harbor” for elements that were built or altered between 1992 and 2012 and that conform to the original 1991 ADA Standards. Any such elements that meet the 1991 Standards can remain in place indefinitely until such time as they are physically altered. As an example, light switches installed at 54 inches above the floor in conformance with the old ADAAG may remain in place until they are altered in future remodeling projects, even though the 2010 ADAS require light switches to be installed no higher than 48 inches above the floor.

In some instances, the 2010 ADAS are more stringent. Also, in some instances, the 2010 ADAS are less stringent than the original ADAAG, and in these cases accessibility can be reduced to the level of the 2010 ADAS. As an example, the location of an accessible toilet centerline in the original ADAAG must be 18” exactly

to a side wall. In the 2010 ADAAS, the toilet may be between 16” and 18” to the side wall.

There are also 14 new scoping elements that must comply now with the 2010 ADAS that did not appear at all in the original ADAAG. The 14 new scoping areas include some items that do apply to these facilities:

(A) Residential facilities and dwelling units (B) Amusement rides, (C) Recreational boating facilities, (D) Exercise machines and equipment, (E) Fishing piers and platforms, (F) Golf facilities, (G) Miniature golf facilities, (H) Play areas, (I) Saunas and Steam rooms, (J) Swimming pools, wading pools, and spas, (K) Shooting facilities with firing positions (L) Miscellaneous - (1) Team or player seating, (2) Accessible route to bowling lanes, (3) Accessible route in court sports facilities

Per Title III of the ADA, existing public sector facilities are subject to the continuing obligation to make facilities accessible to the extent “readily achievable”.

II. OVERVIEW OF ADA REQUIREMENTS

A. BACKGROUND

The Americans with Disabilities Act of 1990 (ADA) is civil rights legislation designed to extend civil rights protection to persons with disabilities. It is not a building code, although many of the technical requirements in ADAAG resemble technical standards of a building code. It is primarily administered by the Department of Justice. A complaint can be filed by any person, and fines and other penalties may be assessed as determined by the Department of Justice. In addition, the ADA includes a mechanism for the Justice Department approval of local codes to be consistent with the requirements of the ADA.

There are four Titles to the Americans with Disabilities Act:

Title I Employment - Prohibits discrimination in hiring and requires employers to provide "reasonable accommodation" to disabled individuals with respect to job description and the work place. Employment accessibility is/was not included in the E&A' scope of work and is not part of this report.

Title II Public Services and Transportation - Prohibits state and local governments from discrimination by requiring "program accessibility". Program accessibility can be attained by rescheduling and/or relocating programs to accessible locations or by making physical facility changes, called "structural changes" in the ADA. Program accessibility must be achieved to the extent that it does not cause "an undue burden", a significantly higher standard than "readily achievable", applicable under Title III, which applies to privately owned “public accommodations”. The two City Owned Facilities fall under Title II.

Title III Public Accommodations - Places of public accommodations are required to be made accessible where "it is readily achievable", with a deadline for

existing facilities as of January 26, 1992. Title III is applicable to the private sector.

Title IV Telecommunications - Applies to companies providing telephone service to the public. They must offer telecommunications devices for the deaf (TDD'S), or other equipment.

Title II applies to the Phase III- ADA Surveys – Public Spaces as part of the City's "program".

Under Title II, the ADA requires public entities to remove barriers in their existing programs *to the extent that it does not cause an "undue burden"*. In preparing this report, E&A was not provided confidential information on the details of the City's finances and/or annual budgeting. Therefore, it is the responsibility of the City to make the final determination of what constitutes does not cause an "undue burden" for the entity in a given year. In addition, the ADA is designed so that accessibility can be achieved over the long term. This means that what is not achievable in year one (based on what does not cause an undue burden), may be achievable at a future point in time.

Because E&A did not survey areas within staff spaces, E&A is not addressing any potential Title I Employee issues that may be required as "reasonable accommodation" to any disabled employees.

B. TECHNICAL REQUIREMENTS / STANDARDS

The 2010 ADA Standards (ADAS herein) as adopted and enforceable by the U.S. Department of Justice, is the current (effective 3/15/12) technical accessibility standard applicable when constructing new public accommodation facilities or altering existing facilities after January 26, 1993. These standards apply retroactively in requiring owners to remove barriers to existing programs.

When implementing solutions to barrier removal, as an alternative to literally complying with a technical standard cited in ADAS, the ADA allows for an "equivalent facilitation" to accomplish barrier removal. This is acceptable to the extent that such action provides greater or equal access. For example, a pharmacy may provide a free prescription drug delivery service *in lieu of* renovating the entry to the pharmacy. However, the Owner should be aware that providing "operational solutions", rather than physical facility solutions, is a less enduring approach to barrier removal and may require continued training, monitoring and enforcement of staff operations.

State and local code requirements apply to buildings constructed or renovated under a building permit. These may also apply if, and when renovations are made to remove barriers. As previously stated, E&A assessed for compliance with the currently enforceable 2010 ADA Standards only. Building Code compliance is not applied retroactively, unlike the ADA. Fortunately, ADAS requirements and the current building code are an estimated 95% identical.

C. GENERAL PRIORITIES UNDER THE ADA

The ADA provides general priorities in 28 CFR Part 36.304(c) as guidance only for barrier removal in public accommodations (Title III). These would be reasonable to apply to public entity facilities as well to help prioritize program access per Title II. These are not mandatory priorities, but rather, general guidance as to relative importance. As the Owner makes a determination of phasing and implementation priorities for barrier removal, we recommend taking the ADA general priorities into account, along with other factors including budget, operational issues, and public usage data. In this report E&A has assigned these ADA general priorities (PR) to each noted barrier for guidance only. As part of a Transition Plan, it is the City's responsibility to further prioritize removal of barriers to programs based upon finances and program priorities to the extent that it does not cause an "undue financial burden".

ADA Priorities per 28 CFR Part 36.304(c) as Guidance Only	
1	Provision of access to a place of public accommodation from public sidewalks, <u>parking</u> , or public transportation. These measures include installing <u>entrance</u> ramps, widening entrances, and providing accessible parking spaces/ signage.
2	Provision of <u>access to those places where goods and services</u> are made available. These measures include revising interior routes, adjusting the layout of tables, providing Braille and raised character building signage, widening interior doors, and installing ramps.
3	Provision of <u>accessible restrooms</u> , such as removal of obstructing items on the route to the restroom, widening of restroom doors, widening of toilet stalls, provision of accessible plumbing fixtures, and installation of grab bars.
4	Making <u>other modifications</u> to provide access to the goods, services, facilities, privileges, advantages, or accommodations, such as accessible public <u>phones</u> and <u>water fountains</u> .

III. PHASE III ADA FACILITY SURVEY REPORT OVERVIEW

A. REPORT CONTENTS AND FORMAT

This report is based upon field observations of barriers, as defined by the currently enforceable 2010 ADA Standards (28 CFR Part 35). The complete report for each facility includes the following:

1. The *Overview/ Executive Summary*, with the essential *Assumptions Sections* accompany the report.
2. The *Appendix* includes an *ADA Survey Results Legend* and *Abbreviation List* in this section.
3. The *ADA Survey Results* is the detailed report of the barriers observed at each public restroom, citations, and comments on ADA compliance. Please reference the *ADA Survey Results Legend* for more information on reading the report. Each building also includes *Captioned Photo Pages* provided for illustrative purposes. Photos are not intended as comprehensive documentation.

All Report Data is being be provided in electronic format on our customer accessed web based version of Survey Solutions database for the Owner to use in managing a barrier removal program. This new capability is being provided in lieu of the previous stand-alone Survey Manager™ Software used in our Phase I surveys, a Project Status / Report Writer application for the City to manage the data in the database. The Phase I data from E&A's previous ADA Survey, using the 1994 ADA Accessibility Guidelines, has also been installed and can be accessed on our web based database as a separate "Phase I project". However, the two phases of data are not able to be commingled for technical software reasons, as well the two different ADA Survey Standards used.

B. ASSUMPTIONS & CONSIDERATIONS

This report divides Assumptions and Considerations into three categories: *Facility*, *General*, and *Technical*.

Facility Assumptions

These assumptions are specific to the City of Bellevue project.

1. *Public Use* – E&A treated the term "public" to mean facilities used by "other than City employees only". This may include City residents, school groups, vendors, and other similar outside users.
2. *Operations and Program Information* - We were provided with limited program information concerning facility operations. Solutions for barrier removal were developed based upon our observations of existing conditions and the program information provided.
3. *Department Office Spaces* – This ADA Survey addresses public program areas of facilities. In a typical administrative office, this might include a public information counter and/or a conference room (spaces where the public may be directed unescorted). E&A did *not* survey staff areas unless noted herein. If the public is allowed into these areas, the assumption is that the public would only do so in an escorted manner, where any assistance (such as an inaccessible door knob) could be provided by the person escorting. Title I of the ADA covers employee issues, and the city needs to make reasonable accommodations to employees with disabilities, on a personal basis, not a prescriptive standard.
4. *Properties Surveyed* – The list of Phase III properties was selected by the City.
5. *Public Rights-of-Way* – The surveys did not generally include the public right-of-way sidewalks and curb ramps, except where it is explicitly part of the scope or essential to a facility accessible route. Public right-of-way sidewalks and curb ramps are part of the City's program, but are beyond the scope of this survey and report. Note that Final technical standards for public rights-of-way have not been issued by the Access Board or adopted by DOJ at this time. The Proposed standards (commonly called PROWAG) are in draft form only, and should be used

only for guidance. ADAS is recommended to be used as a reasonable standard to the extent technically feasible, and we have used this standard in our survey.

6. *Park Like Facilities* - Note that technical standards for outdoor developed public recreation areas have not been issued by the Access Board or adopted by DOJ at this time. Specifically excluded from this survey are outdoor trails, and outdoor amenities such as the SBCC Challenge Course and Zip tour. ADAS is recommended to be used as a reasonable standard to the extent technically feasible, and we have used this standard in our survey.
7. *City Policies for Equivalent Facilitation* – We are not aware of any formal or informal policies that are currently used in facilities to provide an equivalent facilitation. E&A recommends all such operational policies be formally adopted in writing, and signage be posted in a conspicuous location to allow customers to note such available equivalent services.
8. *“Historic” Buildings* - Alterations in historic buildings must comply with the same standards as other alterations to existing buildings unless “it is determined in accordance with defined procedures (ADAS) 202.5 that compliance with accessibility requirements for accessible routes (exterior and interior), ramps, entrances or toilets would threaten to destroy the historic significance of the building or facility.” If this were determined to be the case the exceptions for alterations to qualified historic buildings or facilities for that element shall be permitted to apply.

Although there are many buildings people would believe to be historic or which have unique details, only those buildings registered as a National, State or Local Historic Landmarks would meet the requirements. There are prescribed procedures per the National Historic Preservation Act Section 106 for determining deviations. For state and local Historic Landmarks, there are similar determinations to be made by the State Historic Preservation Officer of other delegated authority.

Per the ADAS, Minimal Requirements for accessibility in Historic Buildings are:

- a) A minimum of one accessible route from the site to an accessible entry.
- b) At least one accessible entry shall be provided. (If public entries cannot comply, then a non-public, unlocked entry may be provided, with directional signage provided at the public entries.)
- c) If toilets are provided, at least one toilet on an accessible route must be provided. (A unisex privacy restroom may be used.)
- d) An accessible route shall be provided to all public spaces at the accessible level of the entry.

Again, these minimal requirements may only be used by exception, when it is formally and properly determined that meeting the standard requirements for alterations to buildings cannot be done, in order to preserve the historic nature. It may be that only some aspects of the standards specifically cannot be met.

Although we have been design sensitive in our recommendations, we have not coordinated with the preservation authorities. The Owner needs to take this step.

The Phase III facilities would not fall into this category.

9. *E&A Recommended Solutions* – The solutions proposed in our survey are recommendations based upon survey observations and our experience, and do not reflect any design study. There may be alternative compliant solutions. For some items we indicated “further design study required” where the solution requires detailed study, or where there is no obvious solution. In retrofits, accessibility must be provided to the maximum extent technically feasible. Solutions also do not take into account notable aesthetic considerations which could modify or increase the cost of implementing the solution in an acceptable way.
10. *Locked Rooms* – Occasionally we may have encountered an area that was locked, and there was no one on site who could provide access. We assumed that most of these were storage areas, however, there could be some areas used by the public that were not assessed.
11. *Door Maneuvering Space* – In our report we use the term “level” for door maneuvering space, clear floor space, and ramps landings. In this context “level” means having a slope in all directions no more than 2% (1:48) per ADAS requirements, which is a slope of ¼” per foot. This is considered level per ADAS.
12. *Plumbing Fixture Counts* – E&A did not perform an analysis of plumbing Code requirements to determine if the minimum number of plumbing fixtures is provided in each room or space.
13. *Owner Items* - Some Recommendations indicate “Owner Items” and carry no cost for removal. Since the City maintains in-house forces that may be responsible for general building maintenance and small projects, it will be more cost efficient to have City staff address these relatively minor issues.
14. *Public Areas versus Staff Areas* – Only public areas were surveyed for purposes of identifying and correcting barriers as part of this survey. Staff work areas would be included as part of a reasonable accommodation per Title I of the ADA.
15. *Vehicle Charging Stations* – There are currently no enforceable standards for charging stations. E&A recommends that where provided, an accessible route from the building entry be provided to the charging stations. This is to include a 60” access aisle on one side that will give access to the charger. E&A also recommends having the operable control within the required reach range. E&A cited the charging stations in the report where non-compliant per above recommendations.
16. *Specific Facility Assumptions* – Refer to below for specific assumptions.

Mercer Slough Environmental Education Center

• *Paths and Trails* – The outdoor recreation trail standards have yet to be adopted. Therefore, there is no standard in place that covers these areas. E&A did not survey the trails around the Slough nor did we survey the gravel trail to the lower parking area. Only the immediate wood deck and concrete paved areas were surveyed.

• *Lower Parking Lot* – E&A did not survey the lower parking for accessible parking. We did however use the parking count to determine the number of required accessible spaces to be provided (at the upper lot). Accessible parking for this facility has been provided at the upper lot, which is on the shortest accessible route to entry. The lower lot will only access one building (Wetlab) via the gravel path and platform lift.

• *Wheelchair Lift* – The lift was non-operational and a key is required in order to operate.

• *Sullivan House* – E&A did not survey the Sullivan house as we were informed that it is a staff only administration building.

• *Restrooms* - All restrooms were assessed utilizing ADA standards for adults. There are no separate adult and children restrooms on site that were designed as such. All were designed for adults.

• *Multi-Purpose Classroom Kitchen* - At the kitchen, E&A assumes that among the range of entities that are allowed to use the kitchen (e.g.: community center staff, catering companies, etc.) the public (e.g. community group members) are allowed to access and use the kitchen.

• *Egress Stairs* - E&A is NOT an expert on the subject of fire and life safety matters found in the building code. E&A did NOT review existing exits within the building or analyze the existing egress within the building to determine if accessible means of egress (as scoped by the 2010 ADAS in section 207) had been provided. We did however review the exterior stair from the Preschool at Mercer Slough as it is noted as egress on the plans.

South Bellevue Community Center

• *Community Center* - At the kitchen, E&A assumes that among the range of entities that are allowed to use the kitchen (e.g.: community center staff, catering companies, etc.) the public (e.g. community group members) are allowed to access and use the kitchen.

• *Community Center* - Storage areas, such as where extra tables, performance equipment, etc. are NOT accessed by the general public.

• *Community Center* - E&A is NOT an expert on the subject of fire and life safety matters found in the building code. E&A did NOT review existing exits within the building or analyze the existing egress within the building to determine if accessible means of egress (as scoped by the 2010 ADAS in section 207) had been provided.

• *Community Center* - All restrooms were assessed utilizing ADA standards for adults. There are no separate adult and children restrooms on site that were designed as such. All were designed for adults.

• *Exterior Amenity Areas* - Specifically excluded from this survey are outdoor trails, and outdoor amenities such as the SBCC Challenge Course and Zip tour. However, the playground was assessed.

General Assumptions:

1. *Operations and Program Information* – E&A was provided limited general information concerning facility operations. The report was developed based upon the Consultant’s observations of existing conditions and programmatic information provided. E&A surveyed the properties based upon the current use of the facility, and based our solutions accordingly.
2. *ADAS Amendments* - The 2010 ADA Standards may be periodically amended by The Access Board and adopted by DOJ. The ADA Facility Survey and citations applied were based upon the ADAS standards currently *enforceable by USDOJ* at the time of conducting the field survey. Amendments issued in the Federal Register as adopted by the Department of Justice subsequent to the issuance of the report may affect future barrier removal plans.
3. *“Undue Burden” and Barrier Removal* – The Public Entity is solely responsible for determining when program accessibility does not cause an undue burden based upon the Owner’s current finances. Generally, where the Consultant has made a recommendation to not remove a barrier at the present time, it is only if the cost appeared extremely high *and* only if minor increased accessibility would be achieved as a result of this removal. Such recommendations should be reviewed by the Owner over periods of time, as finances may change.
4. *Reasonable Accommodation to Employees* - Under the ADA Title I, staff areas of existing facilities need not be changed unless an employee with a disability requests a reasonable accommodation be provided. Note that actual accommodations required by an individual with a disability will depend upon their specific needs. Also note that if currently designated “staff” areas were changed into designated “public” areas in the future, it may require removing additional barriers to satisfy ADA requirements for public use.
5. *Building Code* - The current building code may be applicable when securing a building permit for renovations requiring such a permit. There may be some deviations from ADAS in dimensional requirements for accessibility, which should be verified prior to construction. We have attempted to take these into account in our recommended solutions.
6. *Code Required Accessibility Expenditures* - Alteration projects completely distinct from an ADA project may trigger the Code “percentage of cost for path of travel compliance” rules. These regulations require that a portion of the total money spent on renovation be spent to improve the accessibility of the building. Therefore, it would be prudent to evaluate the long-term facility uses and renovation plans prior to implementing ADA barrier removal in order to perform work most cost effectively.

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7. *No Testing of Hidden Conditions or Alarms* - Barrier removal solutions were based upon field observations of existing conditions. No testing, review of construction documents, or review of building codes was undertaken as part of this ADA Facility Survey. For example, grab bar reinforcing within walls was not verified by E&A to be present, or tested by the E&A to assure that the reinforcing meets the required loads for safety. E&A did no testing of alarm systems for compliance with technical standards in ADAAG.
8. *An Important Note* - The Americans with Disabilities Act is a complex law. It contains many concepts and terms which have not been tested by actual experience or defined in the courts with respect to particular factual situations. Accordingly, E&A makes no claim, expressed or implied, that, in preparing this ADA Facility Survey, all possible barriers (to all individuals with disabilities) have been identified whose removal might be required by the ADA.
9. *Fixtures, Furniture and Equipment* - Estimated costs are budgetary only and do not include moveable fixtures, furniture and equipment (FF&E), unless specifically noted in the Matrix.
10. *Preliminary Solutions* - Some recommended solutions are very preliminary in nature and require more detailed design study and code verification to confirm feasibility and costs. The solutions are intended to provide scoping for a designer to provide construction documents for implementation.
11. *Owner Items* - Some Recommendations indicate "Owner Items" and carry no cost for removal. Since the City maintains in-house forces that may be responsible for general building maintenance and small projects, it will be more cost efficient to have City staff address these relatively minor issues.

The Owner is solely responsible for non-discrimination under the ADA and other applicable laws, and civil lawsuits under the ADA (frivolous or otherwise) remain possible regardless of the number or types of barriers, if any, that are removed.

E&A's recommendations should be reviewed by the Owner's legal counsel and risk management and compliance personnel. The modification work required to comply with the ADA varies according to many factors among which are the financial resources of the Owner and significance/ severity of the barriers. The Owner's decisions regarding the scope of work to perform should be based upon the professional advice of the noted parties, along with input from the disabled community or representatives, whenever possible.

Technical Assumptions:

1. *Slip Resistance* - ADAS Section 302 require that both floors on accessible routes and floors within accessible room areas are to be "slip-resistant". While OSHA has considered a Static Coefficient of Friction of 0.5 to be "slip-resistant", the Access Board *recommends* a coefficient of 0.6. Ramps require a higher "slip-resistance" of 0.8.

There is more than one testing methodology, and the results of the different tests are not interchangeable. Tests are for dry surfaces, and do not take into account wet surfaces.

The Owner should be aware that some VCT (vinyl composition tile) and sheet vinyl floors commonly used may not have Coefficients of 0.6; therefore, would not be considered slip-resistant under the new standard. Generally, stone, tile, wood and vinyl floors with specified “polished” finishes are likely to not meet the ‘slip-resistant’ coefficient. Polishes and contaminants further exacerbate the situation, suggesting a maintenance program. Floors in wet areas, such as hotel guestroom bathrooms are made more slippery by water and soaps. E&A recommend that detailed product information be reviewed for new installations to assure compliance. More discussion is available from the Access Board in a Technical Bulletin (available online at www.access-board.gov).

Your cleaning and maintenance program should be reviewed in the context of slip resistance.

Floors and surfaces were neither tested nor specifically cited in the ADA Facility Survey Reports as this testing is not included in the E&A’ scope of work, nor is it our technical expertise.

2. *Dimensional Tolerances* – Section 104.1.1 of ADAS states that all dimensions are subject to conventional building industry tolerances for field conditions EXCEPT where requirement is stated as a range with specific minimum and maximum end points. Although many studies have been performed to determine what acceptable dimensional tolerances are, there are relatively few widely accepted tolerances. It should be noted that in the case of new construction, design documents can often lead to dimensions that exceed ADAS maximums and minimums, such as a ramp that is designed with a 1:12 slope. The contractor may construct the ramp with a slight field tolerance which results in a ramp that slightly exceeds the 1:12 slope, which is actually the maximum slope allowed by ADAS, not a desired slope. Therefore, design documents should specify maximums and minimums where applicable and also allow for field tolerances.

For the purpose of this Survey Report, in general we did not cite existing field conditions within 1/4” of those specified in ADAS, if it can be assumed that the dimensional discrepancy will not result in any significant decrease in accessibility. Examples would be grab bars mounted at 33-1/4” above the floor (where 33” is the required height) or a ramp handrail with a 1-3/4” diameter (where 1-1/2” diameter is the maximum allowed). Similarly, we allowed a tolerance of 1/4” with toilet dimensions to side walls.

3. *Door Closers* – ADAS does not have a requirement for opening pressure for exterior hinged doors. It has been our experience that existing door closers can only be adjusted to within approximately 3 pounds of their current operating force. Accordingly, we may recommend replacement of door closers, as opposed to simple adjustment, where the opening pressure exceeds 8 pounds. Although the

ADA does not contain a requirement for exterior doors, it has been our experience that this Building Code requirement is extremely necessary for many individuals to enter a building.

C. BUDGET COST ASSUMPTIONS

The budget costs included in the ADA Survey Results Matrix are concept level cost estimates that are provided only to assist the Owner with establishing budgets to remove physical barriers in public accommodation areas, subject to the assumptions in this Executive Summary.

*The costs in the Survey Report are **budget** costs, not an estimate of probable cost, subject to the following conditions:*

Budget costs INCLUDE:

- Costs for direct material, labor and equipment costs, without general contractor mark-ups for overhead and profit, General Conditions, or sales tax.
- Costs are based upon costs typical for the region of the facility at the time of survey. Please refer to indexes such as the Means Construction Index to reflect changing costs over time.
- Costs based upon typical costs for labor and materials for each item, given moderate quantities for typical construction types.

Budget costs DO NOT INCLUDE the following:

Therefore, the following are some specific budget items the Owner should consider in project budgeting, in addition to the costs summarized in this report:

- General Contractor overhead and profit and / General Conditions.
- Construction Management, if used.
- Design and project management fees.
- Inflation factors when phasing construction over time.
- Contingency for unforeseen existing conditions.
- Premiums due to construction in occupied and heavily used spaces.
- Premium for any potential overactive bid climate and potential high volatility and unpredictability reported for certain materials such as lumber and steel.
- Potential asbestos abatement, lead paint abatement, or other environmental impact costs that may arise doing accessibility renovation work.
- Alternate costs that may be included in the comment field, not in the budget cost field.
- High levels of fit, finish and detail that may be desired on an aesthetic basis.
- Contingency due to future changes in the accessibility laws/ codes.
- Permit fees.
- Sales tax.
- Any in-house costs allocated to projects.

D. Removing Barriers to Programs - Using This ADA Survey Report

It is important to understand that the ADA Master Survey Report represents preliminary solutions and costs for physical facility modifications to remove barriers, as if the building were to be constructed to new compliant standards, and that it is NOT automatically necessary to remove barriers to programs by making all these expenditures. There are also some limitations due to structural or technical infeasibility (as specifically defined in the law).

As outlined above in the requirements for Public Sector entities under Title II of the ADA, there are many ways to remove barriers to the City's programs, and that program accessibility include far more than the facility survey that is E&A scope of work under our contract.

Part of the City's programs include telephone services and written information at each department. This type of program access is not part of this report.

To implement the survey information in this report, there are some important concepts.

- The ADA requires that public entities perform a “Self-Assessment” and a “Transition Plan” (implementation plan). The Self-Assessment is the list of barriers. Because E&A survey reports include recommended solutions and itemized costs, the detailed portion of a Transition Plan is completed. The missing piece is the overview planning and prioritization, and matching the needs to annual budgets. It is the City's responsibility to perform this part of the Transition Plan. E&A can assist the City as an additional hourly consulting service. We have successfully used a facilitation approach with other entities with a work session of stakeholders.
- This report provides physical facility solution to remove barriers, and such solutions are enduring solutions.
- There may be other methods to remove barriers in a compliant fashion which may be found as a result of further design study. Our recommendations are preliminary, based upon observed conditions and our experience, and were NOT based upon any design work.
- The City may use operational solutions such as relocating a program to a fully accessible facility from a non-accessible facility.
- Equivalent facilitation, such as providing the service in a different way under the ADA is permitted. However, operationally dependent solutions require clear written policies, ongoing monitoring, training of staff, and usually cannot be depended upon to work on a long term basis.

Alterations

Per Section 202 in the ADA Standards for Accessible Design, there are some aspects worth highlighting.

- No alteration shall be undertaken which decreases or has the effect of decreasing accessibility or usability of a building or facility below the requirements for new construction at the time of alteration.

- Where compliance is “technically infeasible” alterations should provide accessibility to the maximum extent feasible. (Technically infeasible means having little likelihood of being accomplished because existing structural conditions would require removing or altering a load bearing member which is an essential part of the structural frame, OR because existing physical or site constraints prohibit modification or additions for full compliance.
- Elevators do not need to be added to an existing facility of less than 3 stories or of less than 3000 s.f. per story except with respect to any facility that houses a shopping center, a shopping mall, the professional office of a health care provider, a terminal, depot, or other station used for specified public transportation, or an airport passenger terminal. This does not eliminate the need to comply with other aspects of facility accessibility. It also does not eliminate the need to provide access to the City programs in another fashion.
- Alterations to primary functions must be done so as to ensure to the *maximum extent feasible* that restrooms, telephones, and drinking fountains serving the area are usable unless such alterations are disproportionate to the overall alteration in terms of scope and cost as determined by criteria by the Attorney General.

IV. EXECUTIVE ACCESSIBILITY SUMMARY

Phases III- ADA Surveys – Public Spaces

E&A was contracted to perform an ADA Facility Accessibility Survey of public areas of two City owned facilities to assess observed barriers under Title II of the ADA using the 2010 ADA Standards (ADAS) currently enforceable by the US Dept. of Justice as a technical standard. A review of accessibility issues per applicable Building Code was NOT part of our scope of work. Review of accessibility within staff only areas was NOT part of our scope of work. However, our proposed preliminary solutions do attempt to take into account some more stringent Building Code dimensional requirements, where clearly applicable.

Under the ADA, the public entities need to remove barriers to programs to the extent that it is “does not cause an undue burden” over time. All new construction after January 26, 1993 should have been constructed in compliance with 1991 Standards (1994 ADAAG). Please reference essential Assumptions in Section III - B above.

As previously stated, the ADA Master Survey Report represents preliminary solutions and costs for physical facility modifications to remove barriers, as if the building were to be constructed to new compliant standards, and that it is NOT automatically necessary to remove barriers to programs by making all of these expenditures.

The total cost to remove all barriers to the two Phase III facilities using facility modifications per the detailed reports is: \$190,137, subject to all the budget assumptions above. Again, this is not what it is likely to cost for full barrier removal if other operational solutions are applied where possible.

Some items that have the “general appearance or symbols of accessibility” are not compliant with the ADA standards.

Administrative spaces were viewed from the perspective of the limited areas that the public can use unaccompanied by staff. These areas are often essential interface points for public service.

Where appropriate, the City may relocate and reschedule programs to alternate accessible locations, or rethink how some services are provided. The completion of a Transition Plan must match the findings to annual budgets, and prepare an overall strategy for removal of barriers to programs.

We have based our recommendations utilizing somewhat limited input from representatives on site and the City’s published information, which may not be a complete understanding of the operation. Again the City’s judgment needs to be applied during implementation.

It should be noted that there is virtually no such thing as a perfectly compliant new building, and we did find some issues in the newest City buildings.

Finally, we recommend that the appropriate people in the Departments take some time to digest the wealth of detail to understand the large picture of their operations and facility issues. The standards are not simple, and implementing barrier removal should be a considered action.

E&A is providing the survey data in electronic format, with client access to our web based custom ADA Survey Solutions™ Software, for the City to use in managing the process.

Endelman & Associates PLLC has been pleased to work with the City, and will remain available to work with you as your future needs may require.

Brief Overview of Findings

The following are “snapshots” of the significant issues and extent of non-compliance in the surveyed facilities. These are not intended to be complete summaries. Please see the ADA Master Survey Reports for each facility.

Mercer Slough Environmental Education Center

Many of the issues found were relative to the exterior accessible routes. The accessible parking exceeds 2% slope, and the concrete walkways from parking exceeds 2% cross slope and 5% running slope. The route to the Wetlabs from the visitor center is not accessible as the walkway that travels around the Sullivan House has excessive cross slopes and running slopes. The platform lift requires a key, and lacks compliant door maneuvering space. It was not operated at the time of the survey.

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The restrooms had several issues. The Visitor Center restrooms have toilets that lack the required clearances and mirrors that are too high. Restroom Building 1 has lavatories that are too high and toilet stall doors that lack the required clearances.

There are entry door thresholds and deck thresholds that exceed 1/2", up to 2".

The classrooms are for the most part accessible but have non-compliant amenities such as sinks and work tables.

South Bellevue Community Center

The parking area lacked a sufficient number of accessible stalls. The existing accessible stalls were inaccessible due to slope issues within the stall and the access aisle. The walkway from the accessible parking lacks an accessible route due to non-compliant cross slopes (exceeding 2%) at various locations along the sidewalk. The Men's and Women's restrooms contain non-compliant plumbing fixtures that include accessible lavatories at non-compliant heights, and accessible toilet stalls that lack the minimum required width and door maneuvering space. The showers have non-compliant thresholds and the locker rooms lack accessible benches. A number of interior doors with closers required an opening force that exceeded the maximum allowed (5 pounds). The height of lower electrical outlets at several rooms was less than the minimum required to the centerline of the lower socket of the outlet (15" minimum).

The classrooms lack an accessible sink with knee space.

The commercial kitchen which is leased to the public lacks accessible sinks and work surfaces.

The playground lacks an accessible route to the ground level components due to surface material. There is an elevated play structure with no ground level components.

Please see the ADA Master Survey Reports for details of these and other items not discussed above. Total budget cost to address all the issues as defined, subject to assumptions herein, is included at the end of the ADA Survey Report.

Please call me you require any clarifications on our report.

Respectfully submitted,



Bart Sanderson, Senior Consultant
Endelman & Associates PLLC

BellevuePhIII-ExecSum

APPENDIX

Included in the Appendix are the following items:

A. Abbreviations

B. Legend for the ADA Survey Results Report

APPENDIX A - ABBREVIATIONS

General: These are common abbreviations that may be used in the Report.

@	At	LF	Lineal Feet
AC	Asphalt Paving	LL	Lower Level
ACCESS	Accessible	LBS	Pounds Force
ADA	Americans with Disabilities Act	LS (or LSsum)	Lump Sum
ADAAG	ADA Accessibility Guidelines	MAX	Maximum
		MIN	Minimum
ADAS	The ADA Standards for Accessible Design	MEZZ	Mezzanine
		N	North
AFF	Above Finished Floor	PH	Phone
AMBU	Ambulatory Stall	P	Public
ANSI	American National Standards Institute, Inc.	POS	Point of Sale
		PR	Priority
APPROX	Approximately	PUB	Public
BBQ	Barbecue	RM	Room
BLDG	Building	RR	Restroom
BSMT	Basement	S	South
COMM'L	Commercial	S	Staff
CONC	Concrete	SF	Square Feet
CONF	Conference	SAN NAPKIN	Sanitary Napkin
CORR	Corridor	STR	Stair
CT	Court (Tennis, etc.)	T	Toilet
E	East	TYP	Typical
EA	Each	W	West
ELEV	Elevator	WAC (51-50)	Washington Administrative Code Amendments to 2003 IBC
EXT	Exterior		
FLR or FL	Floor		
INT	Interior	WF	Water Fountain
LEV	Level		

Appendix B. LEGEND for the ADA Survey Results Report (Matrix)

This Legend is essential to assist in for properly interpreting the recommendations for facility accessibility solutions to program barriers in the report.

Building ID (Client): The facility location may be followed by an ID# using any Client provided numbers.

Barrier (#xx): This item describes the observed barrier (or potential barrier) to the disabled. (Numbers are used for report cross referencing use only.)

ADA Citation: This item identifies the section of the 2010 ADA Standards (ADAS) referenced for each Barrier. The Citations are per ADAAG as enforced by the U.S. Dept. of Justice current at the completion of the field ADA Facility Survey.

Location: This is the area where the barrier was observed. Where appropriate, items may be grouped and shown with multiple quantities. The first number shown is the floor(s) number. The second number identifies Suite number(s) as appropriate.

Recommendation (Proposed Solution): This column describes the solution proposed to remove or reduce the potential barrier identified, compliant with the 2010 ADA Standards, current at the time of the Phase II survey. Often there may be alternate solutions. Some solutions may require further design study.

PR (ADA Guidance Priority): For general guidance only, the recommended solution is given an ADA General Priority Coding of 1, 2, 3, or 4. These codes correspond to the barrier removal categories provided for general guidance in the *Regulation on Nondiscrimination on the Basis of Disability by Public Accommodations and in Commercial Facilities* (reference 28 CFR Part 36.304(c)). E&A believes that they are appropriate for guidance to public entities per Title II. Upon completion of the Survey, the City should establish implementation priorities in detail based upon criteria such as the law, operational needs, funding and long range planning.

- 1 Provision of access to a place of public accommodation from public sidewalks, parking, or public transportation. These measures include installing entrance ramps, widening entrances, and providing accessible parking spaces/ signage.
- 2 Provision of access to those places where goods and services are made available. These measures include revising interior routes, adjusting the layout of tables, providing Braille and raised character building signage, widening interior doors, and installing ramps.
- 3 Provision of accessible restrooms, such as removal of obstructing items on the route to the restroom, widening of restroom doors, widening of toilet stalls, provision of accessible plumbing fixtures, and installation of grab bars.
- 4 Making other modifications to provide access to the goods, services, facilities, privileges, advantages, or accommodations, such as accessible public phones and water fountains.

Comments: This column is used to clarify the ADAS requirement or further clarify the Recommendation shown.

Recommendation (Proposed Solution): This column describes the solution proposed to remove or reduce the potential barrier identified, compliant with ADAS standards current at the time of survey. Often there may be alternate solutions. Some solutions may require further design study.

Code: Each recommended solution is given a compliance sufficiency code, numbered from 1 to 5. The Sufficiency Code is to further qualify the level of compliance achieved by, or other major aspect of the recommended solution. The meanings are as follows:

- 1 When the proposed solution is implemented, this barrier will be removed, and will be, in our opinion, in compliance with the requirements of the Americans with Disabilities Act's current ADA Accessibility Guidelines.
- 2 Complete compliance with the requirements of the ADA will not be provided. It is either "technically infeasible", or (for the Public Sector), the solution would appear to be "an undue burden" per ADA standards for Public entities. Therefore, the Consultants have recommended that no changes be made at this time. Strict adherence with the ADAAG standards would in our opinion carry an unreasonable cost (to be solely determined by the Owner) or be technically infeasible. In enforcement, the USDOJ would take into account the Owner's financial capability among other ADA criteria.
- 3 The solution appears to be the responsibility of another entity such as a Tenant, who we recommend be notified of the barrier.
- 4 The condition identified technically does not meet the requirements of ADAAG. However, in our professional opinion, the deviation is minor enough or within construction tolerances that correction of it would not likely significantly increase the degree of accessibility of the condition. For that reason, no modification beyond what is described in the *Recommendation* column is proposed, but sufficiency is not indicated as fully compliant.
- 5 Because complete compliance appears to be technically infeasible or extremely difficult due to the existing building configuration, the proposed alternative means (or policy implementation) has been proposed. While this recommended solution provides less than complete physical compliance, it may constitute a reasonable course of action for this situation that improves the condition.
- 6 E&A recommends considering delay in implementing a specific item pending resolution and adoption of the "New ADAAG" which may make the current condition compliant.
- 7 The subject item is not accessible, but is not required to be based upon an exemption in the law. It may, however, be a program issue that requires some action.

Comments: This column is used to clarify the ADAAG requirement or further clarify the Recommendation shown.

TYPE (S/P): This column provides an indication of the area in which the barrier was observed. E&A's scope of work is solely public accommodation areas. **S** indicates that it is in a **Staff** area; **P** indicates a **Public Accommodation** area, and therefore subject to Title II. Under Title I, Work in a staff area would not technically required to be performed until a person with a disability employed in this area requires reasonable accommodation, except for provision of an accessible route to staff areas.

PRI (ADA Guidance Priority): For general guidance only, the recommended solution is given an ADA General Priority Coding of 1, 2, 3, or 4. These codes correspond to the barrier removal categories provided for general guidance for public accommodations in the *Regulation on Nondiscrimination on the Basis of Disability by Public Accommodations and in Commercial Facilities* (reference 28 CFR Part 36.304(c)). Upon completion of the Survey, the Owner may establish implementation priorities in detail based upon criteria such as the law, operational needs, funding and long range planning.

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- 4 Making other modifications to provide access to the goods, services, facilities, privileges, advantages, or accommodations, such as accessible public phones and water fountains.

Qty / Units: The quantity includes the unit of measure applicable to the Recommended Solution, and to the Budget Cost immediately following.

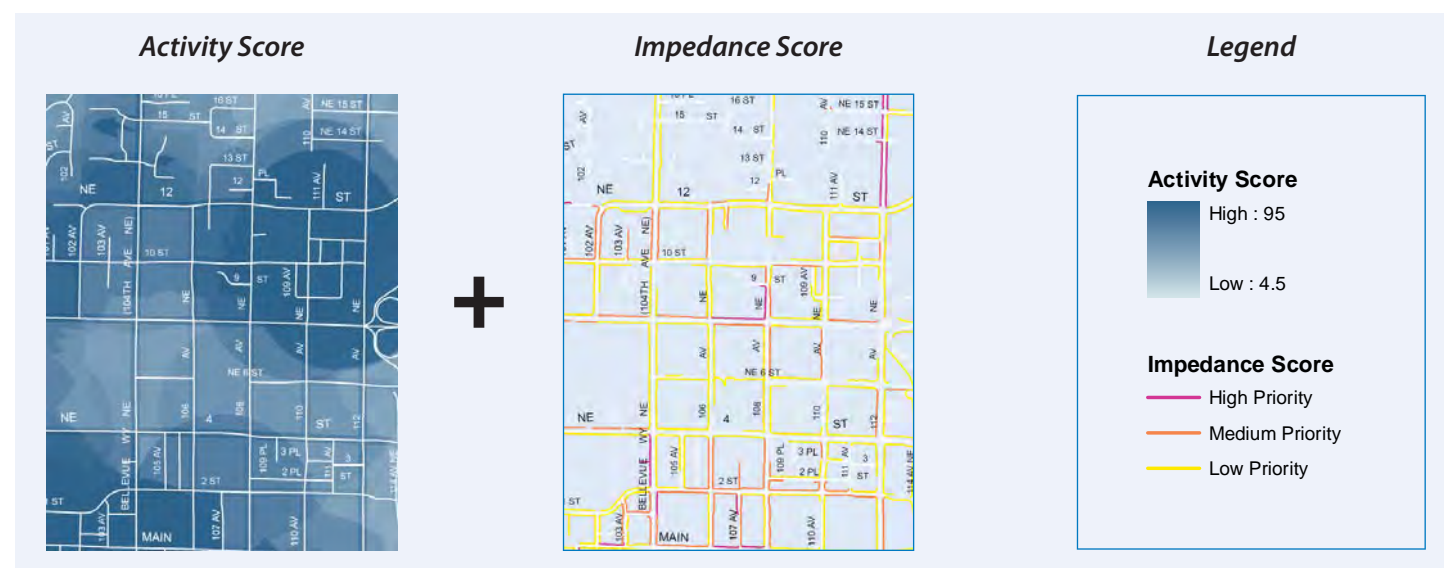
Budget (Budget Cost): This column provides a budgetary opinion of approximate construction cost per item, based only upon descriptive scope, not a completed design. This is not a cost estimate. Design fees, management costs, sales tax, internal costs and General Contractor overhead and profit, escalation, and other items are not included in these figures. Allowances are shown when further design study is required. *All costs for implementation are not included in these costs. Therefore, please see Budget Cost Assumptions section and Facility Assumptions section in the Report for details.*



Executive Summary

Barrier Ranking

Supporting the City in prioritizing barrier remediation efforts is a GIS-based analysis that results in a combined activity and impedance score for every sidewalk and curb ramp in Bellevue. A high activity score is representative of areas where pedestrian activity (especially among persons with disabilities) is likely to be greatest, based on demographic, land use, and transportation conditions. A high impedance score is representative of areas where the quality of existing pedestrian infrastructure is poor for persons with disabilities, based on barriers documented in the sidewalk and curb ramp inventory. The key principle here is to assign a high ranking on a needs basis, not necessarily to the sidewalks and curb ramps in the worst condition but rather to those that would provide the most benefits to people with disabilities.



A number of mechanisms are in place to make sidewalks accessible to people with disabilities, including sidewalk maintenance, curb ramp retrofit, and pavement overlay programs. In addition, the city incorporates ADA improvements into its capital projects and as permit conditions for development.

Implementation

This report provides the foundation to the Transportation Department's ADA Transition Plan Update. Bellevue's ADA Transition Plan references the barrier rankings of non-standard pedestrian facilities documented in the ADA Sidewalk and Curb Ramp Self-Evaluation Report to identify corrective measures in the city's public rights-of-way. Recognizing that the City has limited funds and cannot immediately make all sidewalks and curb ramp facilities fully accessible, the City's ADA Transition Plan sets forth the schedule for making access modifications.

For more information:

The ADA Sidewalk and Curb Ramp Self-Evaluation Report is located at: <http://www.bellevuewa.gov/accessibility-reports.htm>

The project manager, Franz Loewenherz, can be reached at 425-452-4077 or FLoewenherz@bellevuewa.gov

ADA Self-Evaluation Report



Executive Summary

Plan Purpose

The City of Bellevue is a community of 120,000 residents. According to the 2000 Census, approximately 15 percent of Bellevue residents live with a developmental, physical, or mental disability. As the population continues to age, the number of people with disabilities is expected to increase.

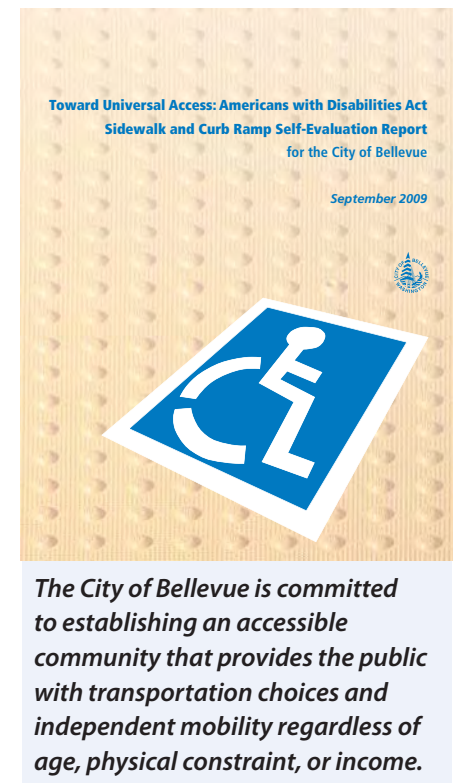
Access to civic life by persons with disabilities is a fundamental goal of the Americans with Disabilities Act (ADA). In support of this goal, the City of Bellevue's ADA Self-Evaluation Report is a comprehensive analysis of the City's existing sidewalk and curb ramp facilities. Data collected from this assessment enables city staff to: (i) determine if a sidewalk or curb ramp meets intended design specifications and guidelines; (ii) catalog feature and maintenance information; (iii) identify portions of sidewalks needing accessibility improvements; (iv) quantify the extent of the work required; and, (v) add pedestrian information to the City's Geographic Information Systems (GIS) database.

The report outcomes were informed by an extensive public outreach effort that provided a wide range of stakeholders from the disability community with improved access to the decision-making process. The outreach effort included surveys, focus groups, public meetings, and conversations with residents at sidewalk and curb ramp locations. The ranking of barriers in this process responds to the self-stated needs of people with disabilities in the community.

Project Approach

In undertaking this asset data inventory and condition assessment, the City employed innovative technologies to document barriers and prioritize improvements where they are most needed. The technology, developed through a pilot program with the Federal Highway Administration, uses an Ultra-Light Inertial Profiler (ULIP) mounted on a Segway scooter. The device's lasers, accelerometers, and gyroscope are designed to measure the sidewalk surface at a rate of 10,000 records per second capturing highly accurate information about slope and small surface variations that can make a sidewalk difficult to navigate. A tray and handle bar mount support a notebook computer that offered an interactive, real-time display during data collection. The accompanying software produced a text file compatible with the City's GIS asset management database.

The technical precision offered by Bellevue's approach is identified as a best practice in ADA Compliance at Transportation Agencies: A Review of Practices (NCHRP 20-07 Task 249), a Texas Transportation Institute study. The report notes that "[e]fforts such as those at the City of Bellevue, Washington, that rely on the collection of large datasets at extremely fine spatial and temporal disaggregation levels have the potential to significantly automate the identification of non-compliant locations



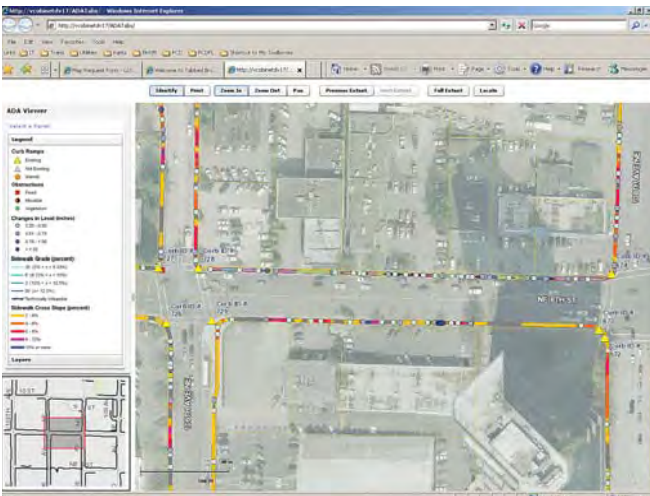
The City of Bellevue is committed to establishing an accessible community that provides the public with transportation choices and independent mobility regardless of age, physical constraint, or income.



City of Bellevue's ULIP and Segway Human Transporter equipment.



Executive Summary



Screen-shot image of ADA mapping viewer interface.

in the field.” GIS played a pivotal role in the project from data acquisition (organizing the millions of data points generated during the study) to creating a web-based mapping interface for asset management and compliance monitoring. The result is a mapping interface on the City’s intranet that documents all non-standard data points related to sidewalks and curb ramps. The ADA viewer interface creates a platform from which city staff retrieve information on barriers in the public right of way, informing the City’s corrective measures on where to make repairs to sidewalks and curb ramps.

The following is a summary of barriers documented in the report.

Sidewalk Data

- 1. Sidewalk facilities** (Total: 321 miles)
 - Concrete surfaces: 298 miles
 - Asphalt/brick/other surfaces: 23 miles
- 2. Sidewalk obstructions** (Total: 6,944 instances)
 - Fixed obstructions: 226 instances
 - Movable obstructions: 722 instances
 - Vegetative obstructions: 5,996 instances
- 3. Sidewalk changes in level** (Total: 27,558 instances)
 - 0.25” - 0.5”: 20,002 instances
 - 0.51” - 0.75”: 7,014 instances
 - 0.76” - 1”: 274 instances
 - > 1”: 268 instances
- 4. Non-standard sidewalk grade** (Total: 39 miles)
 - 5% - 8.33%: 32 miles
 - 8.34% - 10%: 4 miles
 - 10.1% - 12.5%: 2 miles
 - Deemed technically infeasible: 95 miles
- 5. Non-standard sidewalk cross slope** (Total: 212 miles)
 - 2 - 4%: 134 miles
 - 4.1 - 6%: 49 miles
 - 6.1 - 8%: 15 miles
 - 8.1 - 10%: 7 miles
 - > 10%: 7 miles
- 6. Sidewalks with either a non-standard cross slope or grade**
 - Including grade deemed technically infeasible: 254 miles
 - Excluding grade deemed technically infeasible: 225 miles



Fixed obstructions.



Change in level.



Vegetation and grade barriers.

ADA Self-Evaluation Report



Curb Ramp Data

- 1. Ramp type data**
 - Ramp locations: 4,586
 - Sidewalk locations lacking ramp access (non-standard): 1,041
- 2. Non-standard returned curb locations**
 - Total: 11
- 3. Flare data**
 - Slopes $\leq 10\%$ (standard): 457
 - Slopes between 10.1% – 12% (non-standard): 225
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- 4. Ramp landing panel data**
 - Depth greater than or equal to 48” (best practice): 2,276
 - Depth between 36” - 48” (standard): 283
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- 6. Gutter data**
 - Running slope $\leq 5\%$ (standard): 2,362
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 - Non-standard gutter/ramp transitions: 713
- 7. Ramps lacking detectable warning surface (non-standard)**
 - Total: 2,557
- 8. Marked crossings**
 - Ramps without marked crossings: 2,869
 - Ramps with one marked crossing: 500
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 - Diagonal ramps lacking 48” clear space (non-standard): 78



Steep driveway cross slope.



Missing ramp.



Barrier forces street use.



No ramp landing panel.



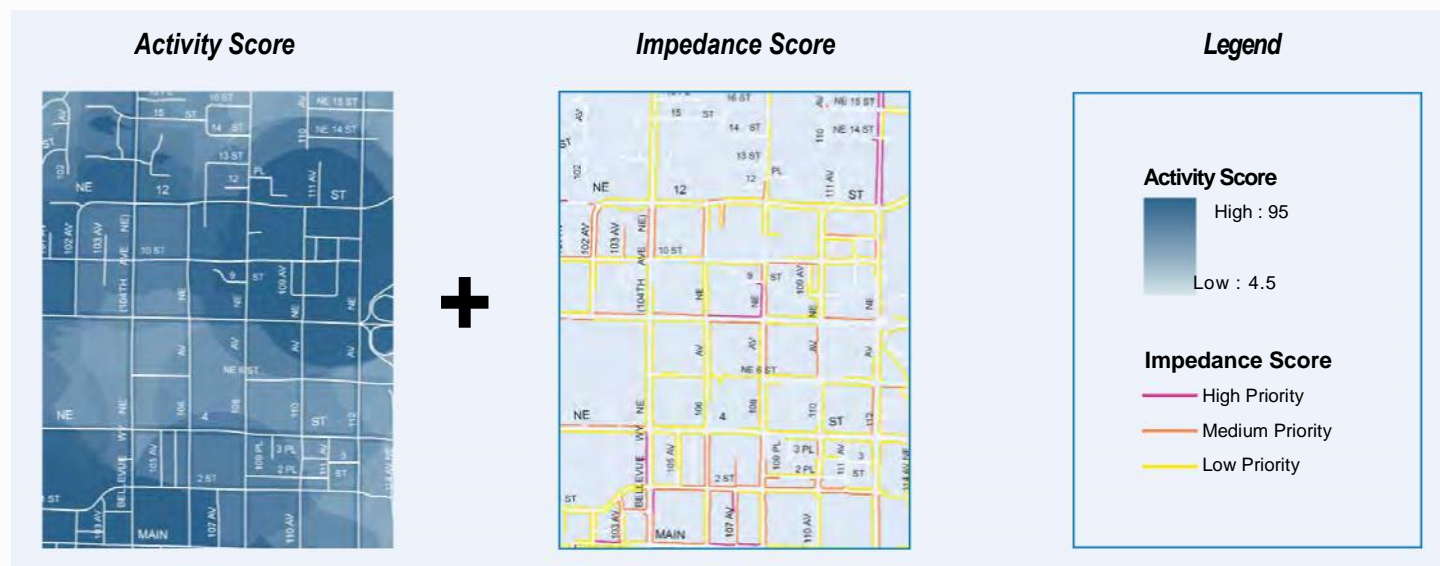
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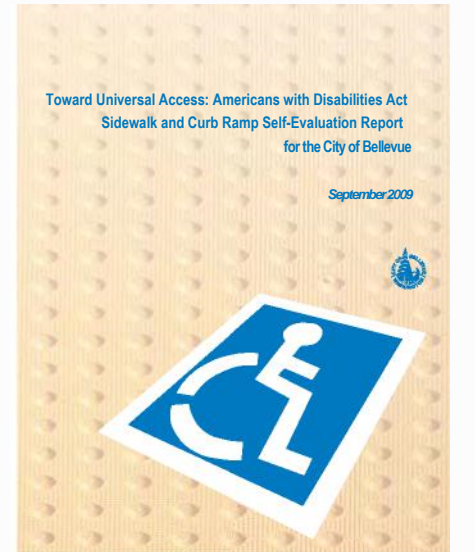
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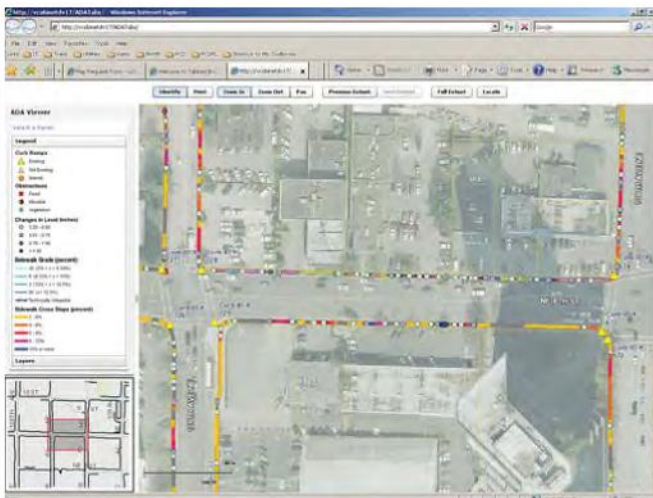
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Missing ramp.



Barrier forces street use.



No ramp landing panel.



Steep ramp running slope.

Accessible Pedestrian Signals

Bellevue, WA

Self-Evaluation

City of Bellevue

Compiled by Stela Nikolova

Student Intern Project

February 6th, 2012

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- II. APS and How it Serves Individuals with No/Limited Vision
- III. MUTCD 2003 APS Standards vs. MUTCD 2009 APS Standards
- IV. Self-evaluation and Prioritization
- V. Average Cost

I. INTRODUCTION

The Americans with Disabilities Act (ADA) of 1990 is the most comprehensive federal civil-rights statute protecting the rights of people with disabilities. It guarantees equal opportunity for individuals with disabilities in employment, public accommodations, transportation, State and local government services, and telecommunications.

ADA implementing regulations require programs of state and local governments to be accessible. ADA defined sidewalks and street crossings as a program and facility of the state and local government, which must be accessible under Title II of the ADA.

ADA requires a self-evaluation by all public entities. Self-evaluation enables local governments to pinpoint the facilities, programs and services that must be modified or relocated to ensure that local governments are complying with the ADA.

In 2011, The City of Bellevue conducted an Accessible Pedestrian Signals self-evaluation to determine if Bellevue's intersections comply with APS standards. Two separate evaluations were performed:

- Evaluation of all signalized intersections to prioritize the need for APS installation
- Evaluation of intersections with existing APS for compliance with standards

The project approach consisted of four phases:

- Observation and data collection
- Database analysis
- Intersection evaluation and ranking
- Calculating the cost of improvements and new installations

II. APS AND HOW IT SERVES INDIVIDUALS WITH NO/LIMITED VISION

APS defined:

According to the Manual on Uniform Traffic Control Devices, or MUTCD, an Accessible Pedestrian Signal is a device that communicates information about pedestrian timing in a nonvisual format such as audible tones, verbal messages, and/or vibrating surfaces (MUTCD 2003, Section 4A.02).

Accessible pedestrian signals and detectors provide information in non-visual formats (such as audible tones, speech messages, and/or vibrating surfaces (MUTCD 2009, Section 4E.09)

According to draft the Pedestrian Rights of Way Accessibility Guidelines (PROWAG), an Accessible Pedestrian Signal is a device that communicates information about the WALK phase in audible and vibrotactile formats (Draft PROWAG, R105.5).

APS can provide information to pedestrians about:

- Existence and location of the pushbutton
- Beginning of the WALK interval
- Direction of the crosswalk and location of the destination curb
- Intersection street names in Braille, raised print, or through speech messages
- Intersection signalization with a speech message
- Intersection geometry through tactile maps and diagrams, or through speech messages

Research has found that APS improved crossing performance by blind pedestrians:

- More accurate judgments of the onset of the WALK interval
- Reduction in crossings begun during the DONT WALK phase
- Reduced delay
- Significantly more crossings completed before the signal changed

To determine whether or not the intersection needs an Accessible Pedestrian Signal, the traffic engineer analyzes:

- vehicle traffic volume
- pedestrian activity
- intersection crash history
- the physical environment

APS are needed especially at intersections when:

- Pedestrians are unable to discern the WALK interval
- A pedestrian pushbutton controls the pedestrian crossing phase
- Signalization includes a leading pedestrian interval or an exclusive pedestrian phasing

Audible (speech or tone) and vibrotactile indications of the WALK interval are required by Draft PROWAG. The MUTCD does not currently provide specifications of audible WALK indications except cautions about the use of tones that could be confused with birds or back-up beepers.

WALK indications can be provided by use of one or more of the following:

- Tones
- Speech messages (also referred to as verbal messages)
- Vibrating surfaces

Recent research recommends tones at locations where the speakers for APS for two different directions can be separated. Speech messages are recommended where speakers must be located on the same pole or less than 10 feet apart.

Each APS has the following features:

- Pushbutton locator tone — tone that constantly repeats once per second from each pushbutton to help people who are blind or who have low vision find the pushbutton.
- Audible and vibrotactile WALK indications – sound and vibration during the WALK signal
 - o Rapid tick WALK indication — rapidly repeating tick from the pushbutton location to indicate that the WALK signal is on.
 - o Speech WALK message — name of the street to be crossed, then “walk sign is on to cross and the street name again. For example, “Haywood, Walk sign is on to cross Haywood.”
- A tactile arrow on the pushbutton, or above the pushbutton, points in the direction of travel on the crosswalk. The arrow vibrates during the WALK signal
- Actuation indicator — a tone, a click, or a spoken “wait” when the pushbutton is pushed to indicate that the button has been pushed

- Braille street name — street name that the pushbutton controls is on the plate above the pushbutton in Braille
- Optional features when you hold the pushbutton in for more than a second
 - o Pushbutton information message — name the street that the pushbutton controls and the other streets at the intersection. Example: “Wait to cross Vermont at Haywood.”
 - o Audible beaconing — Volume of locator tone is boosted during the flashing DONT WALK interval to allow a person who is blind to home in on the opposite corner of the street

III. MUTCD 2003 APS STANDARDS VS. MUTCD 2009 APS STANDARDS

The latest edition of the Manual on Uniform Traffic Control Devices (2009 edition) was published in the Federal Register with an effective date of January 15, 2010. States must adopt the 2009 National MUTCD as their legal State standard for traffic control devices within two years from the effective date. Washington State is still using the 2003 MUTCD edition. The evaluation was based on the MUTCD 2003 APS standards. However, the City of Bellevue is starting to install new APS devices according to the MUTCD 2009 standard due to upcoming adoption of the new MUTCD 2009 standards for Washington State.

MUDCT 2003 Edition

In the 2003 MUTCD edition the Accessible Pedestrian Signals are included in Section 4E.06 Accessible Pedestrian Signal, and Section 4E.09 Accessible Pedestrian Signals Detectors. The Accessible Pedestrian Signals Section 4E.06 contains five standards, and the Accessible Pedestrian Signals Detectors Section 4E.09 contains two standards.

MUTCD 2009 Edition

The 2009 MUTCD edition adds additional standards and regroups them under different categories. Each of these categories represents one section in the MUTCD 2009 and includes standards for both the Accessible Pedestrian Signals and the Accessible Pedestrian Signal Detectors. The five categories are listed below:

- Section 4E.09– General
- Section 4E.10– Location
- Section 4E.11– Walk Indications
- Section 4E.12– Tactile Arrows and Locator Tones
- Section 4E.13– Extended Pushbutton Press Features

The following table compares the MUTCD 2003 AND MUTCD 2009 editions.

Category	MUTCD 2003		MUTCD 2009	
	Section	Standard	Section	Standard
Accessible Pedestrian Signals and Detectors— General	2003 4E.06	When used, accessible pedestrian signals shall be used in combination with pedestrian signal timing. The information provided by an accessible pedestrian signal shall clearly indicate which pedestrian crossing is served by each device. Under stop-and-go operation, accessible pedestrian signals shall not be limited in operation by the time of day or day of week.	2009 4E.09	When used, accessible pedestrian signals shall be used in combination with pedestrian signal timing. The information provided by an accessible pedestrian signal shall clearly indicate which pedestrian crossing is served by each device. Under stop-and-go operation, accessible pedestrian signals shall not be limited in operation by the time of day or day of week.
	2003 4E.09	At accessible pedestrian signal locations where pedestrian pushbuttons are used, each pushbutton shall activate both the walk interval and the accessible pedestrian signals.	2009 4E.09	At accessible pedestrian signal locations where pedestrian pushbuttons are used, each pushbutton shall activate both the walk interval and the accessible pedestrian signals.
Accessible Pedestrian Signals and Detectors— Location			2009 4E.10	If two accessible pedestrian pushbuttons are placed less than 10 feet apart or on the same pole, each accessible pedestrian pushbutton shall be provided with the following features (see Sections 4E.11 through 4E.13): A. A pushbutton locator tone, B. A tactile arrow, C. A speech walk message for the WALKING PERSON (symbolizing WALK) indication, and D. A speech pushbutton information message.
			2009 4E.10	If the pedestrian clearance time is sufficient only to cross from the curb or shoulder to a median of sufficient width for pedestrians to wait and accessible pedestrian detectors are used, an additional accessible pedestrian detector shall be provided in the median.

Accessible Pedestrian Signals and Detectors– Walk Indications			2009 4E.11	Accessible pedestrian signals shall have both audible and vibrotactile walk indications.
	2003 4E.06	Vibrotactile pedestrian devices, where used, shall indicate that the walk interval is in effect, and for which direction it applies, through the use of a vibrating directional arrow or some other means.	2009 4E.11	Vibrotactile walk indications shall be provided by a tactile arrow on the pushbutton (see Section 4E.12) that vibrates during the walk interval.
	2003 4E.06	When accessible pedestrian signals have an audible tone(s), they shall have a tone for the walk interval.	2009 4E.11	Accessible pedestrian signals shall have an audible walk indication during the walk interval only.
	2003 4E.06	The audible tone(s) shall be audible from the beginning of the associated crosswalk	2009 4E.11	The audible walk indication shall be audible from the beginning of the associated crosswalk.
			2009 4E.11	Where two accessible pedestrian signals are separated by a distance of at least 10 feet, the audible walk indication shall be a percussive tone.
			2009 4E.11	Where two accessible pedestrian signals on one corner are not separated by a distance of at least 10 feet, the audible walk indication shall be a speech walk message
			2009 4E.11	Audible tone walk indications shall repeat at eight to ten ticks per second.
			2009 4E.11	Audible tones used as walk indications shall consist of multiple frequencies with a dominant component at 880 Hz.

	2003 4E.06	When choosing audible tones, possible extraneous sources of sounds (such as wind, rain, vehicle backup warnings, or birds) shall be considered in order to eliminate potential confusion to pedestrians who have visual disabilities.	2009 4E.11	Automatic volume adjustment in response to ambient traffic sound level shall be provided up to a maximum volume of 100 dBA.
	2003 4E.06	When verbal messages are used to communicate the pedestrian interval, they shall provide a clear message that the walk interval is in effect, as well as to which crossing it applies.	2009 4E.11	If speech walk messages are used to communicate the walk interval, they shall provide a clear message that the walk interval is in effect, as well as to which crossing it applies.
			2009 4E.11	Speech walk messages shall be used only at intersections where it is technically infeasible to install two accessible pedestrian signals at one corner separated by a distance of at least 10 feet.
	2003 4E.06	The verbal message that is provided at regular intervals throughout the timing of the walk interval shall be the term “walk sign,” which may be followed by the name of the street to be crossed.	2009 4E.11	Speech walk messages that are used at intersections having pedestrian phasing that is concurrent with vehicular phasing shall be patterned after the model: “Broadway. Walk sign is on to cross Broadway.”
			2009 4E.11	Speech walk messages that are used at intersections having exclusive pedestrian phasing shall be patterned after the model: “Walk sign is on for all crossings.”
			2009 4E.11	Speech walk messages shall not contain any additional information, except they shall include designations such as “Street” or “Avenue” where this information is necessary to avoid ambiguity at a particular location.

	2003 4E.06	A speech walk message is not required at times when the walk interval is not timing, but, if provided: A. It shall begin with the term "wait." B. It need not be repeated for the entire time that the walk interval is not timing.	2009 4E.11	A speech walk message is not required at times when the walk interval is not timing, but, if provided: A. It shall begin with the term "wait." B. It need not be repeated for the entire time that the walk interval is not timing.
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	2003 4E.06	A speech walk message is not required at times when the walk interval is not timing, but, if provided: A. It shall begin with the term "wait." B. It need not be repeated for the entire time that the walk interval is not timing.	2009 4E.11	A speech walk message is not required at times when the walk interval is not timing, but, if provided: A. It shall begin with the term "wait." B. It need not be repeated for the entire time that the walk interval is not timing.
			2009 4E.11	If a pilot light (see Section 4E.08) is used at an accessible pedestrian signal location, each actuation shall be accompanied by the speech message "wait."
			2009 4E.11	Following the audible walk indication, accessible pedestrian signals shall revert to the pushbutton locator tone (see Section 4E.12) during the pedestrian change interval.
	2003 4E.06	If the tone for the walk interval is similar to the pushbutton locator tone, the walk interval tone shall have a faster repetition rate than the associated pushbutton locator tone.	2009 4E.12	To enable pedestrians who have visual disabilities to distinguish and locate the appropriate pushbutton at an accessible pedestrian signal location, pushbuttons shall clearly indicate by means of tactile arrows which crosswalk signal is actuated by each pushbutton. Tactile arrows shall be located on the pushbutton, have high visual contrast (light on dark or dark on light), and shall be aligned parallel to the direction of travel on the associated crosswalk.
			2009 4E.12	An accessible pedestrian pushbutton shall incorporate a locator tone.
	2003 4E.09	When used, pushbutton locator tones shall be easily locatable, shall have duration of 0.15 seconds or less, and shall repeat at 1-second intervals.	2009 4E.12	Pushbutton locator tones shall have duration of 0.15 seconds or less, and shall repeat at 1-second intervals.

		2009 4E.12	Pushbutton locator tones shall be deactivated when the traffic control signal is operating in a flashing mode. This requirement shall not apply to traffic control signals or pedestrian hybrid beacons that are activated from a flashing or dark mode to a stop-and-go mode by pedestrian actuations.
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Accessible Pedestrian Signals and Detectors– Walk Indications		2009 4E.11	If a pilot light (see Section 4E.08) is used at an accessible pedestrian signal location, each actuation shall be accompanied by the speech message “wait.”
		2009 4E.11	Following the audible walk indication, accessible pedestrian signals shall revert to the pushbutton locator tone (see Section 4E.12) during the pedestrian change interval.
Accessible Pedestrian Signals and Detectors– Tactile Arrows and Locator Tones	2003 4E.06		If the tone for the walk interval is similar to the pushbutton locator tone, the walk interval tone shall have a faster repetition rate than the associated pushbutton locator tone.
		2009 4E.12	To enable pedestrians who have visual disabilities to distinguish and locate the appropriate pushbutton at an accessible pedestrian signal location, pushbuttons shall clearly indicate by means of tactile arrows which crosswalk signal is actuated by each pushbutton. Tactile arrows shall be located on the pushbutton, have high visual contrast (light on dark or dark on light), and shall be aligned parallel to the direction of travel on the associated crosswalk.
		2009 4E.12	An accessible pedestrian pushbutton shall incorporate a locator tone.

	<p>2003 4E.09 When used, pushbutton locator tones shall be easily locatable, shall have duration of 0.15 seconds or less, and shall repeat at 1-second intervals.</p>	<p>2009 4E.12 Pushbutton locator tones shall have duration of 0.15 seconds or less, and shall repeat at 1-second intervals.</p>
		<p>2009 4E.12 Pushbutton locator tones shall be deactivated when the traffic control signal is operating in a flashing mode. This requirement shall not apply to traffic control signals or pedestrian hybrid beacons that are activated from a flashing or dark mode to a stop-and-go mode by pedestrian actuations.</p>

<p>Accessible Pedestrian Signals and Detectors – Extended Pushbutton Press Features</p>		<p>2009 4E.13 If audible beaconing is used, the volume of the pushbutton locator tone during the pedestrian change interval of the called pedestrian phase shall be increased and operated in one of the following ways: A. The louder audible walk indication and louder locator tone comes from the far end of the crosswalk, as pedestrians cross the street, B. The louder locator tone comes from both ends of the crosswalk, or C. The louder locator tone comes from an additional speaker that is aimed at the center of the crosswalk and that is mounted on a pedestrian signal head.</p>
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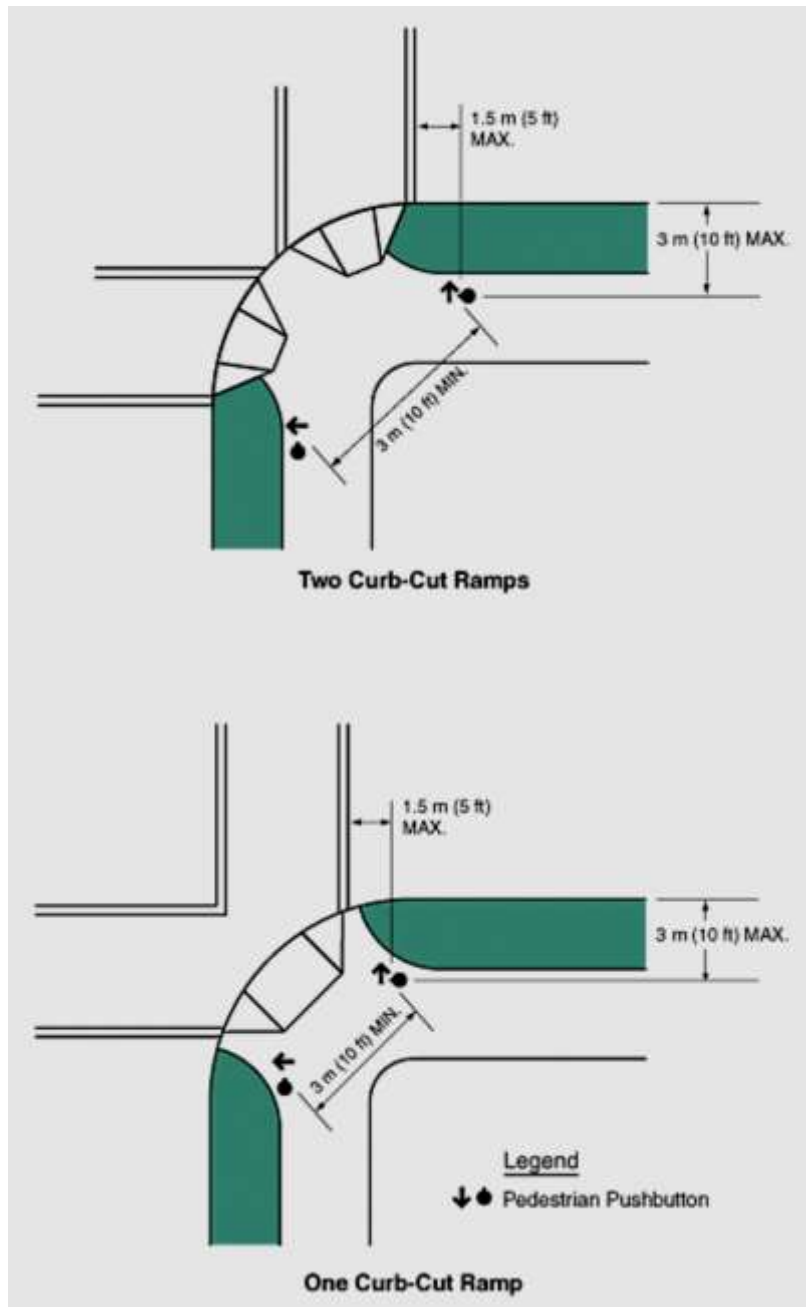


Figure 1: Recommended Pushbutton Locations for APS

According to the MUTCD 2003 APS standards the pushbuttons for accessible pedestrian signals should be located as follows: (see Figure 1)

- A. Adjacent to a level all-weather surface to provide access from a wheelchair, and where there is an all-weather surface, wheelchair accessible route to the ramp;
- B. Within 1.5 m (5 ft) of the crosswalk extended;
- C. Within 3 m (10 ft) of the edge of the curb, shoulder, or pavement; and

D. Parallel to the crosswalk to be used.

In the MUTCD 2009 Section 4E.08, Pedestrian Detectors a pushbutton location area is defined as shown on Figure 2.

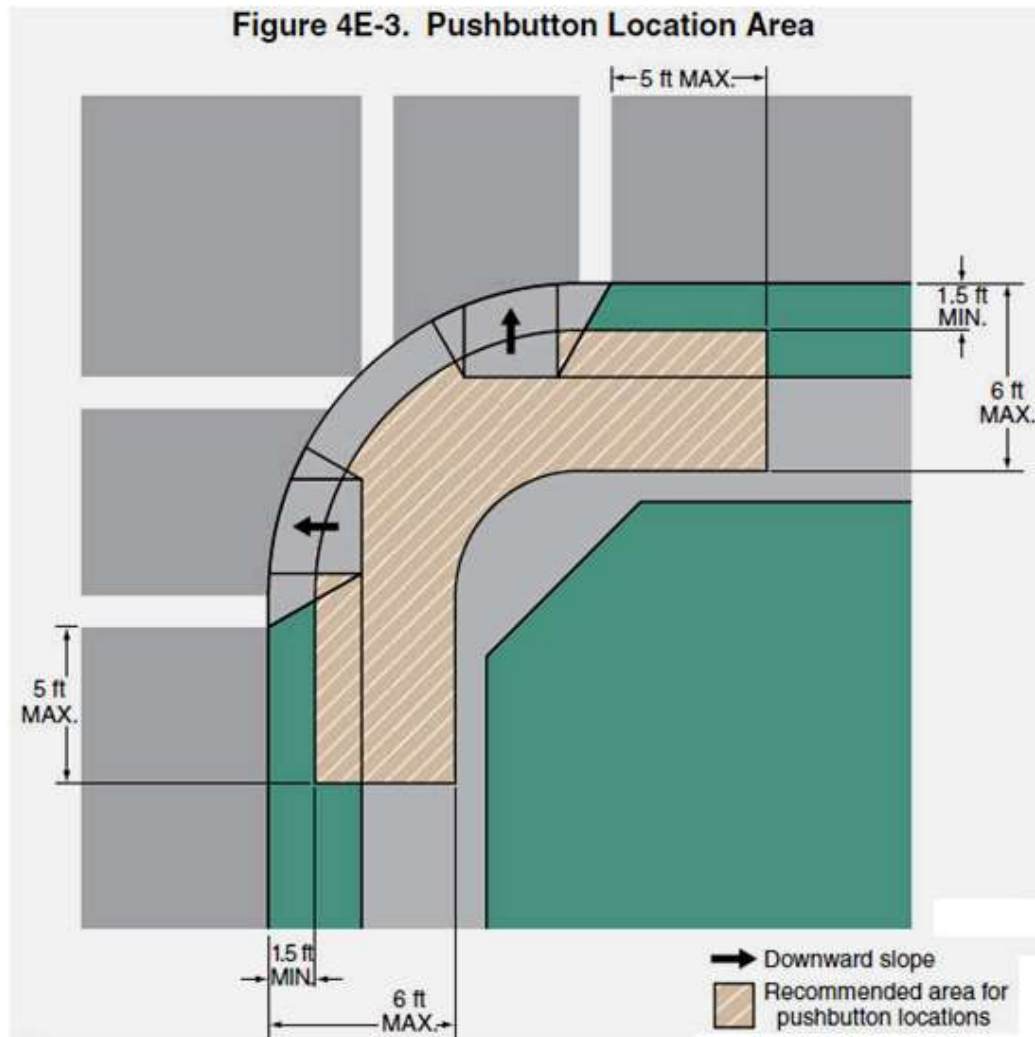


Figure 2: Pushbutton Location area

Notes:

1. Where there are constraints that make it impractical to place the pedestrian pushbutton between 1.5 feet and 6 feet from the edge of the curb, shoulder, or pavement, it should not be further than 10 feet from the edge of curb, shoulder, or pavement.
2. Two pedestrian pushbuttons on a corner should be separated by 10 feet.

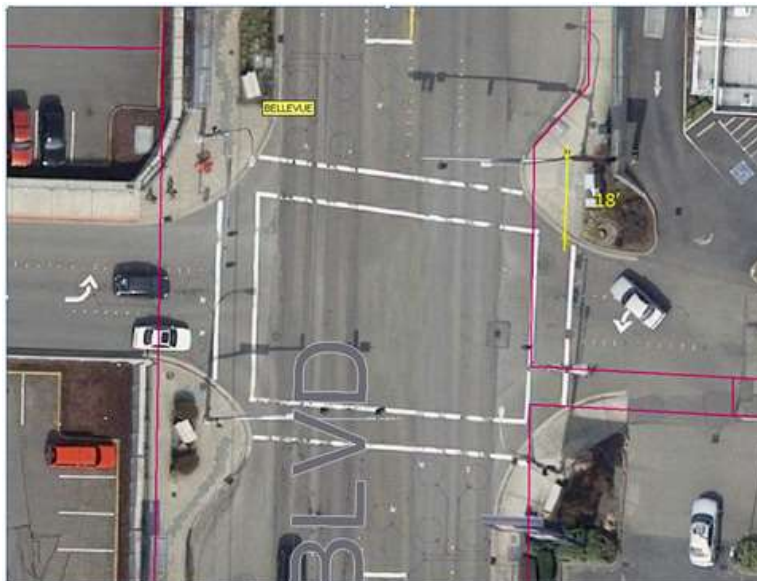
IV. EVALUATION AND PRIORITIZATION

For the evaluation of the APS installed at Bellevue's intersections, the first step was field observation of the 66 intersections that have APS devices on each, or on some of their corners. (35 intersections were observed to have APS installed on each corner and 31 intersections had APS on at least one but not all corners.) The following elements were evaluated:

1. Location of the pushbutton according to the recommended pushbutton locations (Figure 1) at the MUTCD 2003. However, further evaluation may be needed for evaluation of the criteria according to the MUTCD 2009.

- A) Height of the pushbutton
- B) Distance between poles
- C) Distance from the pole to the edge of the curb

In this example the pushbutton is installed 18 feet from the edge of the sidewalk. It may cause confusion for a blind pedestrian trying to locate the crosswalk.



156th Ave NE and NE 13th St

D) Distance between the pole and the crosswalk line at the outside side of the intersection
The MUTCD recommends a maximum of 5 feet from the pushbutton to the intersection line on the outside side of the intersection. The following is an example of a non-compliant facility with a distance of 11 feet.



156th Ave NE & NE 13th St

Although this case is not mentioned in the MUTCD, moving the pushbutton to the inside side of the intersection, may cause problems location the crosswalk. This is an example where the location of the pole is far from the crosswalk and because of the complex geometry of the intersection a blind pedestrian may walk to the middle of the intersection.



Bel-Red Rd & NE 20th St

As can be seen from the aerial photo, the location of the pushbutton may mislead a blind pedestrian about the direction of travel. This becomes a serious issue at intersections with complex geometry.



Bel-Red Rd & NE 20th St

2. APS installations that may cause a hazard for a blind pedestrian

The field observation revealed some locations where elevation differences or obstructions impacted access to/from the APS device and the pedestrian crossing. The following pictures provide some examples.



92nd Ave NE & NE 8th St



Bellevue Way NE & NE 17th St

3. APS Operational Condition

APS malfunctions were observed in several locations including push buttons that did not call the green or that did not inform the pedestrian that the green is on. In some cases the volume was too low the sound was not to standard. Staff were informed of these malfunctions and they were remedied.

4. Type of APS Detector

Three different types of APS detectors are used at the Bellevue's intersection:

- The old type with mounted speakers – they use regular pushbuttons that do not have an arrow and do not vibrate.
- Polara Navigator is a new type APS device that complies with the standards for vibrotactile arrow and audible sounds. The majority of the APS detectors in Bellevue are the Polara Navigator type.
- Dick Campbell is also a new type that complies with the standards.

After the field evaluation, the results were summarized and a priority was given to the intersections that represent a hazard or that have a non-standard device installed.

For the intersections without APS, a point-based priority array was created; the higher the point value the greater the priority for improvement or installation. Intersections with a point total equal to zero fully comply with the standards.

The evaluation criteria included the speed limit, difference between the Speed Limit and actual speeds based on speed studies, traffic volumes, car accidents, and intersection pedestrian accidents. summarizing the number of points for each intersection, the intersections were divided in six priority groups.

The maps at the end of this report show the locations and the different prioritization categories for APS installation of all signalized intersections in Bellevue.

EVALUATING INTERSECTIONS WITH APS

Assigning Points

1. **h** - Height of the pushbutton
Between 36" and 42" - OK
Between 30" and 51" - 1 point
2. **a** – Distance between pushbuttons for both directions
 $a \geq 10\text{ft}$ - OK
 $a = 0$ - 3 points
 $0 < a < 10$ - 3 points
3. **b** – Distance between the pushbutton to the edge of the sidewalk/sidewalk
 $b \leq 10\text{ft}$ - OK
 $12 < b < 20$ - 2 points
4. **c** – Distance between the pushbutton to the sidewalk line of the outer side of the intersection
 $c \leq 5\text{ft}$ - OK
 $5 < c < 13$ - 2 points
 $c < 0$ - 2 points
5. Type APS
New APS - OK
Old APS - 4 points
6. Malfunction - 5 points
7. Hazard - 6 points

Defining priority

1st Priority:

- Eliminating hazards
- Repairing/replacing malfunction buttons
- Replacing old with new APS
- Installing missing APS

If an intersection needs other improvements, the assumption is that all issues are resolved at the same time.

The number of the missing APS pushbuttons at any given intersection is the difference between the numbers of needed buttons and existing buttons. The number of needed buttons is the number of sidewalks multiplied by two.

EVALUATING SIGNALIZED INTERSECTIONS WITHOUT APS

Assigning Points

1. Speed limit in mph

10 mph - 1 point
20 mph - 1 point
25 mph - 2 points
30 mph - 3 points
35 mph - 4 points
40 mph - 5 points

2. Difference between speed limit and speed study in %

Speed studies are available for the most important locations. NA cells in the spreadsheet mean that there is not a speed study available for this location. Empty cells mean that there is no street for this direction.

< 0% - OK; negative values mean the speed study shows lower speeds than the speed limit
0 % - 10 % – 1 point
10 % - 20 % – 2 points
20 % - 30 % – 3 points
30 % - 40 % – 4 points
40 % - 50 % – 5 points
50 % - 60 % – 6 points
60 % - 70 % – 7 points
70 % - 80 % – 8 points

3. Traffic volumes in mph

Traffic volume data is taken from the 3-year (2008-2010) Annual Average Weekday Traffic (AAWDT) from the 2010 City of Bellevue Traffic Data Book. Average values for AAWDT are used for the evaluation. When the data is available for the last two years, the average AAWDT of these two years is used.

There is traffic volume data available for the streets that have the highest traffic volumes only.

0 - 10000 – 1 point
10000 - 20000 – 2 points
20000 - 30000 – 3 points
30000 - 40000 – 4 points
40000 - 50000 – 5 points
50000 - 60000 – 5 points; there is only one case in this category

4. Accident data

The accident data for the 30 intersections with the highest accident rate was used. Points were assigned based on the intersection's accident rate. For the rest of the intersections the accident rate is too low to be considered for the evaluation.

≤ 0.8 – 1 point
1.13 – 2 points
1.47 – 3 points

5. Intersection pedestrian accident data

Possible injuries - 1 point
Non-disabled injuries - 2 points
Disabled injuries - 3 points
Fatal injuries - 4 points

Defining priority

The sum of the assigned points for each category is used to determine the priority. Priority is based on the sum of all points received.

29 points - 35 points – 1st priority
22 points - 28 points – 2nd priority
16 points - 21 points – 3rd priority
9 points - 15 points – 4th priority
1 point - 8 points – 5th priority

Signalized Intersections, Bellevue, WA, 2011

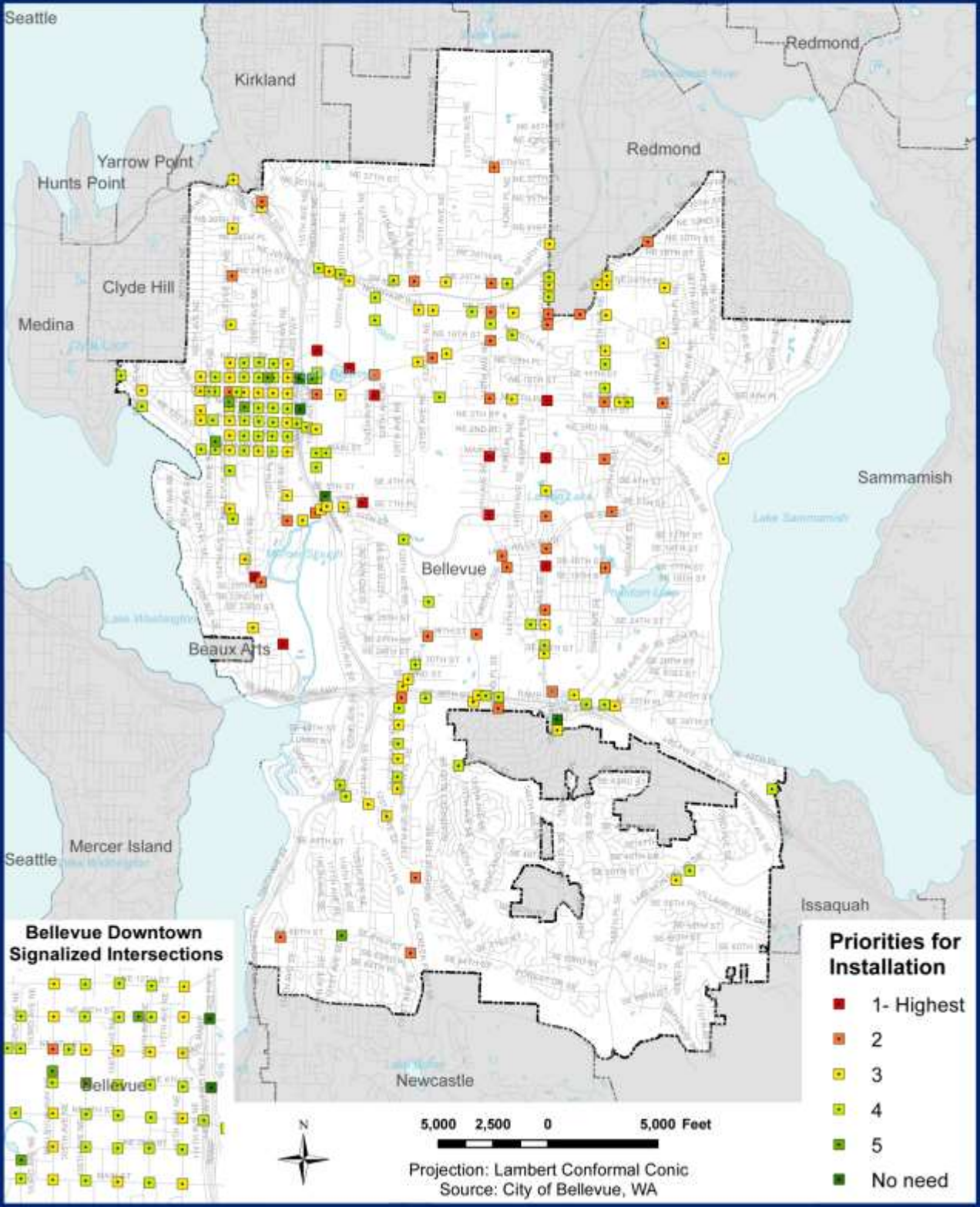


Figure : Signalized Intersections - Need for Installation of APS

APS Locations, Bellevue, WA, 2011

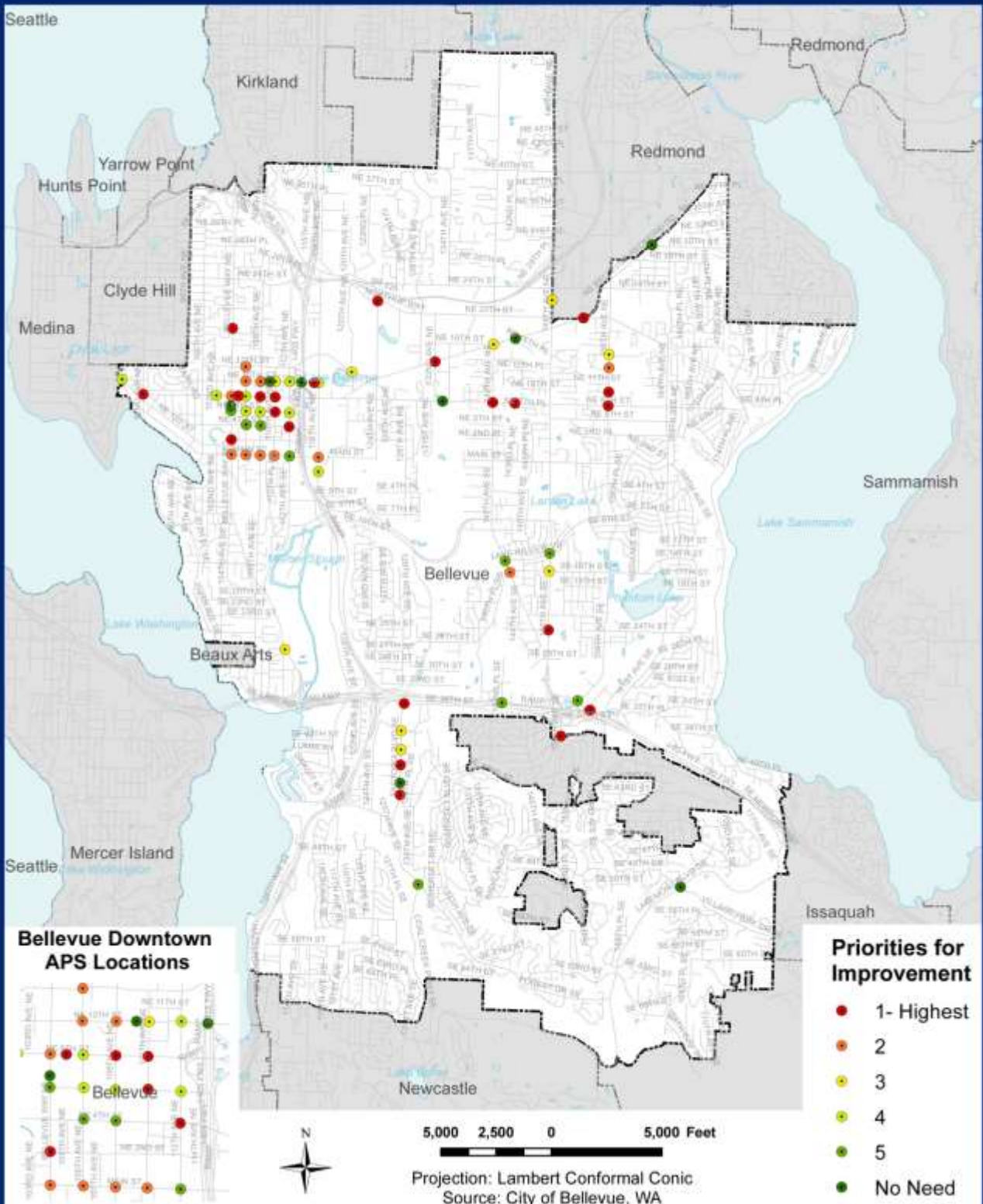


Figure : APS locations - Need for Improvement

V. AVERAGE COST

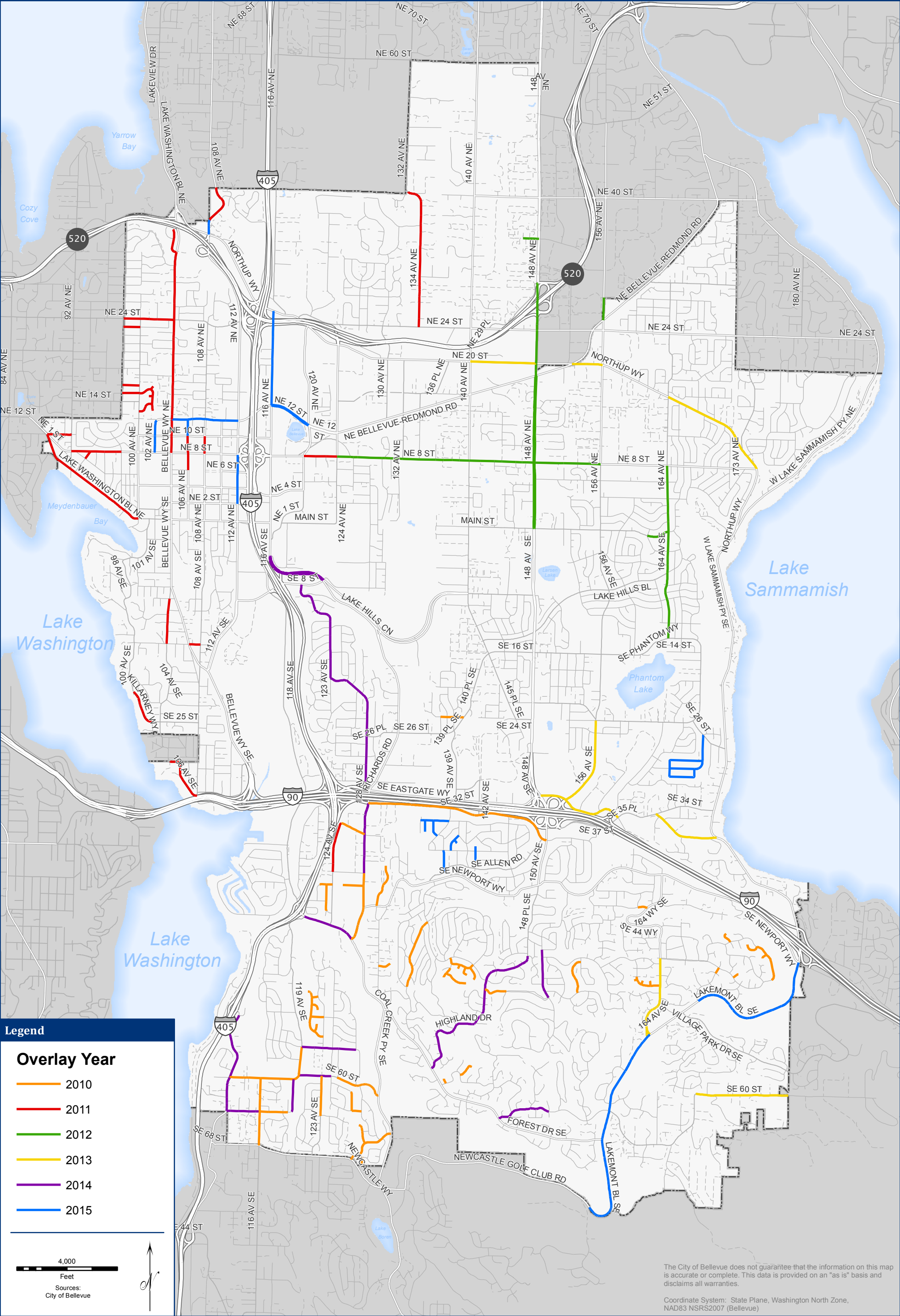
Currently the City of Bellevue installs Polara Navigator Accessible Pedestrian Signals. The installation cost of Polara Navigator per intersection is shown in the table below.

Polara Navigator			
	Device	Labor & Vehicle	Total
CCU	\$2,310.00		\$2,310.00
Button	\$311.75		\$311.75
CCU + 1 Button	\$2,621.75	\$1,000.00	\$3,621.75
CCU + 2 Buttons	\$2,933.50	\$1,000.00	\$3,933.50
CCU + 3 Buttons	\$3,245.25	\$1,000.00	\$4,245.25
CCU + 4 Buttons	\$3,557.00	\$1,000.00	\$4,557.00
CCU + 5 Buttons	\$3,868.75	\$2,000.00	\$5,868.75
CCU + 6 Buttons	\$4,180.50	\$2,000.00	\$6,180.50
CCU + 7 Buttons	\$4,492.25	\$2,000.00	\$6,492.25
CCU + 8 Buttons	\$4,804.00	\$2,000.00	\$6,804.00
CCU + 9 Buttons	\$5,115.75	\$2,000.00	\$7,115.75
CCU + 10 Buttons	\$5,427.50	\$2,000.00	\$7,427.50
Add 1 Button	\$311.75	\$1,000.00	\$1,311.75
Add 2 Buttons	\$623.50	\$1,000.00	\$1,623.50
Add 3 Buttons	\$935.25	\$1,000.00	\$1,935.25
Add 4 Buttons	\$1,247.00	\$1,000.00	\$2,247.00
Add 5 Buttons	\$1,558.75	\$2,000.00	\$3,558.75
Add 6 Buttons	\$1,870.50	\$2,000.00	\$3,870.50
Add 7 Buttons	\$2,182.25	\$2,000.00	\$4,182.25
Add 8 Buttons	\$2,494.00	\$2,000.00	\$4,494.00
Add 9 Buttons	\$2,805.75	\$2,000.00	\$4,805.75
Add 10 Buttons	\$3,117.50	\$2,000.00	\$5,117.50

Cost of all mitigations

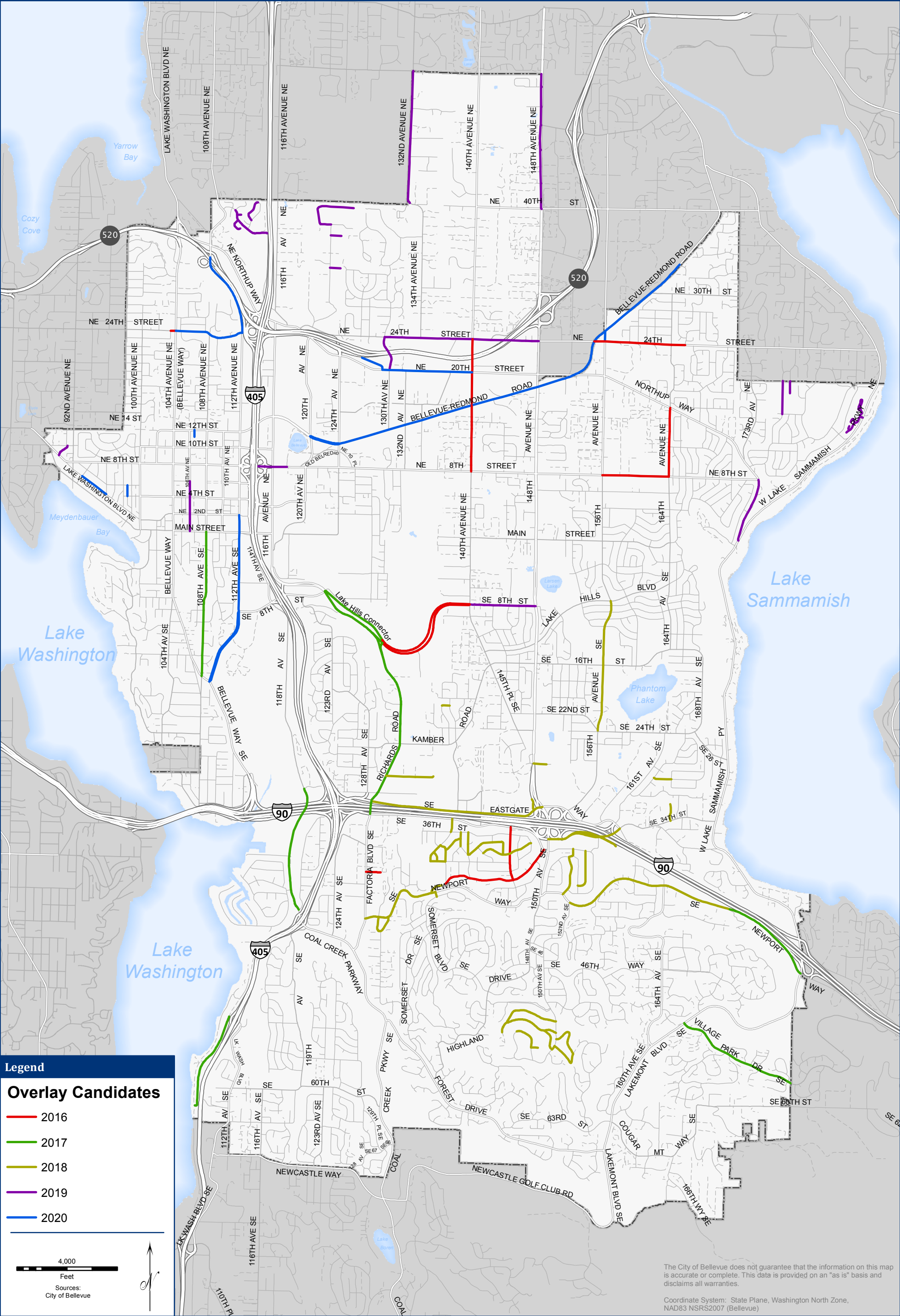
The cost of mitigations includes the cost to improve the existing APS and the cost to install the missing APS on the intersections that already have some APS. The approximate cost of the improved and new installations in this report is \$778,509.25.

2010 to 2015 Overlay Program



Overlay Candidates

2016 - 2020



Project Selection Process for Pedestrian Facilities Compliance Program (PW-W/B-49)

Background:

This program was created in the 1990's. The project selection has been based almost entirely on requests by members of the disabled community. The program has been funded at \$50,000 per year since around the year 2000. Beginning in 2011, the program scope of work was expanded and the budget was doubled to \$100,000 per year to better support the city's ADA Transition Plan. This program, when combined with all of the ADA improvements constructed by the city's Overlay Program, will be our primary response to the goals set forth in the city's ADA Transition Plan.

In 2009, the city completed work on the ADA self evaluation report and the ADA viewer. The self evaluation report rating system includes activity and impedance scores as the primary factors in determining the final score. Factors that influence the activity score include pedestrian activity levels (especially among the disabled), types of nearby land use and demographics. Factors that influence the impedance score include missing wheelchair ramps, fixed obstructions, excessive cross slopes or running slopes, and heaving. In addition to the criteria below, the final score for a given block face(s) or ramp(s) will be the primary consideration for determining what gets included in a project.

Project Selection Process:

- Yearly work plans will be developed by the Pedestrian Facilities Compliance program manager, and reviewed by TATADA. A project team will be assembled each year consisting of the appropriate city staff to provide project support and review functions.
- Utilize the Utilities Department maintenance districts, construct projects in a different district each year, share the work plan with street maintenance to avoid conflicts.
- Try to provide a balance between the highest priority locations and keeping the number of work zones that the contractor has to mobilize in to a reasonable level. For example, we can't necessarily just pick in order the highest priority locations in a given district since the work might be so spread out that it significantly increases our costs.
- Look for partnering opportunities to control costs. For example, partner with CIP projects or the overlay program when such an opportunity is mutually beneficial or at least does not cause undue burden to the other project or program.

- Maintain a high priority on requests from the disabled community, even if they are not in the same district as programmed for that year.
- Utilize the ADA viewer and the self evaluation report, supplemented with field reviews, to look for concentrations of locations with high final scores. Consider lower scoring locations for repair as well on a case-by-case basis to limit the number of work zones.
- Although generally already accounted for in the scoring system, priority will be given to missing ramps, fixed obstructions, heaves greater than $\frac{3}{4}$ " and sidewalk cross slopes greater than 6%.